

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000045729

FILED
Apr 26, 2005
Secretary of State

Entity Name: CAROLYN J. SHOTT FINANCIAL SERVICES, INC.

Current Principal Place of Business:

2415 SOUTH BABCOCK STREET
SUITE E
MELBOURNE, FL 32901

New Principal Place of Business:

1614 GLENRIDGE ST NW
PALM BAY, FL 32907

Current Mailing Address:

2415 SOUTH BABCOCK STREET
SUITE E
MELBOURNE, FL 32901

New Mailing Address:

1614 GLENRIDGE ST., NW
PALM BAY, FL 32907

FEI Number: 58-2667585

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHOTT, CAROLYN J
2415 SOUTH BABCOCK STREET
SUITE E
MELBOURNE, FL 32901 US

Name and Address of New Registered Agent:

SHOTT, CAROLYN J
1614 GLENRIDGE ST., NW
PALM BAY, FL 32907 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: CAROLYN J. SHOTT

04/26/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SHOTT, CAROLYN J
Address: 2415 SOUTH BABCOCK STREET, STE. E
City-St-Zip: MELBOURNE, FL 32901 US

Title: S () Delete
Name: SHELL, CAROLYN J
Address: 2415 S BADCOCK ST., STE E
City-St-Zip: MELBOURNE, FL 32901

Title: T () Delete
Name: REED, RHONDA K
Address: 2415 S BADCOCK ST., STE E
City-St-Zip: MELBOURNE, FL 32901

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SHOTT, CAROLYN J
Address: 1614 GLENRIDGE ST. NW
City-St-Zip: PALM BAY, FL 32907 US

Title: S (X) Change () Addition
Name: SHOTT, CAROLYN J
Address: 1614 GLENRIDGE ST., NW
City-St-Zip: PALM BAY, FL 32907

Title: T (X) Change () Addition
Name: SHOTT, CAROLYN J
Address: 1614 GLENRIDGE ST, NW
City-St-Zip: PALM BAY, FL 32907

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CAROLYN J. SHOTT

PRES

04/26/2005

Electronic Signature of Signing Officer or Director

Date