2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000045729

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

FILED Apr 26, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2415 SOUTH BABCOCK STREET 1614 GLENRIDGE ST NW SUITE E PALM BAY, FL 32907

MELBOURNE, FL 32901

Current Mailing Address: New Mailing Address:

2415 SOUTH BABCOCK STREET 1614 GLENRIDGE ST., NW SUITE E PALM BAY, FL 32907 MELBOURNE, FL 32901

FEI Number: 58-2667585 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: SHOTT, CAROLYN J Name: SHOTT, CAROLYN J

Address: 2415 SOUTH BABCOCK STREET, STE. E Address: 1614 GLENRIDGE ST. NW City-St-Zip: MELBOURNE, FL 32901 US City-St-Zip: PALM BAY, FL 32907 US

Title: Title: () Delete (X) Change () Addition Name: SHELL, CAROLYN J Name: SHOTT, CAROLYN J 2415 S BADCOCK ST., STE E 1614 GLENRIDGE ST., NW Address: Address: MELBOURNE, FL 32901 PALM BAY, FL 32907 City-St-Zip: City-St-Zip:

Title: T () Delete Title: T (X) Change () Addition

 Name:
 REED, RHONDA K
 Name:
 SHOTT, CAROLYN J

 Address:
 2415 S BADCOCK ST., STE E
 Address:
 1614 GLENRIDGE ST, NW

 City-St-Zip:
 MELBOURNE, FL 32901
 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