## 2012 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000049266

Apr 29, 2012 Secretary of State

Date

Entity Name: SHANTHALORPH MANAGEMENT AND INVESTMENT GROUP, INC.

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

1212 MAGNOLIA AVE 6020 DREXEL LANE LEHIGH ACRES, FL 33972

916

FORT MYERS, FL 33919

**Current Mailing Address: New Mailing Address:** 

1212 MAGNOLIA AVE PO BOX 916

LEHIGH ACRES, FL 33972 LOXAHATCHEE, FL 33470

FEI Number: 55-0830138 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145 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:

Electronic Signature of Registered Agent

## **OFFICERS AND DIRECTORS:**

Title: PSTD

PATTERSON, VERON L Name:

PO BOX 916 Address:

City-St-Zip: LOXAHATCHEE, FL 33470

Title: VΡ

Name: PATTERSON, SHAUN S 6020 DREXEL LANE APT#:916 Address: FORT MYERS, FL 33919 City-St-Zip:

Title:

PATTERSON, VERON L Name:

PO BOX 916 Address:

City-St-Zip: LOXAHATCHEE, FL 33470

Title:

PATTERSON, THALIA P Name:

Address: PO BOX 916

City-St-Zip: LOXAHATCHEE, FL 33470

Title:

Name: PATTERSON, VINCENT R

Address: PO BOX 916

LOXAHATCHEE, FL 33470 City-St-Zip:

I hereby 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 all other like empowered.

VΡ SIGNATURE: SHAUN PATTERSON 04/29/2012