2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2008
Secretary of State

DOCUMENT# P03000089221

Entity Name: SOUTH SHORE PROPERTY MANAGEMENT, INC.

Current Principal Place of Business:

533 N NOVA RD STE 211-B
ORMOND BEACH, FL 32174

New Principal Place of Business:

P. O. BOX 2749
DAYTONA BEACH, FL 32115

Current Mailing Address:

533 N NOVA RD STE 211-B
ORMOND BEACH, FL 32174

New Mailing Address:

P. O. BOX 2749
DAYTONA BEACH, FL 32115

FEI Number: 02-0702731 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FARIS, SHERYL T
533 N. NOVA ROAD
SUITE 211
ORMOND BCH, FL 32174 US

Name and Address of New Registered Agent:

LOWE, SHERYL T
313 SOUTH ATLANTIC AVE
DAYTONA BEACH, FL 32118 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: SHERYL T LOWE 04/25/2008
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: FARIS, SHERYL T
Address: 43 FLOWERTREE DRIVE
City-St-Zip: ORMOND BCH, FL 32174

Title: DST ( ) Delete
Name: BARKER, PATRICIA A
Address: 1105 OVERBROOK DR
City-St-Zip: ORMOND BCH, FL 32174

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: LOWE, SHERYL T
Address: 269 MELROSE AVE
City-St-Zip: ORMOND BCH, FL 32174

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: SHERYL T LOWE PD 04/25/2008
Electronic Signature of Signing Officer or Director — Date