## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000129565

Entity Name: SHAWN ANDREWS, INC.

FILED Jan 17, 2006 Secretary of State

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

8415 N. ARMENIA AVE. 6500 LAKE GRAY BLVD. 908

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TAMPA, FL 33604 JACKSONVILLE, FL 32244

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

6500 LAKE GRAY BLVD. 8415 N. ARMENIA AVE.

TAMPA, FL 33604 JACKSONVILLE, FL 32244

FEI Number: 41-2116553 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:

CATON, ANITA E RA CATON, ANITA E RA 103 ORION ST 8413 N. ARMENIA AVE.

ORANGE PARK, FL 32073 US 1006 TAMPA, FL 33604 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: 01/17/2006

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

ANDREWS, SHAWN ANDREWS, SHAWN M Name: Name: 6500 LAKE GRAY BLVD. 8415 N. ARMENIA AVE. Address: Address: City-St-Zip: TAMPA, FL 33604 City-St-Zip: JACKSONVILLE, FL 32244

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutés. 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: SHAWN M. ANDREWS Ρ 01/17/2006