2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000129569

Entity Name: THE SHASTEEN-SIZEMORE CO.

FILED Jan 14, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 905 N FLORIDA AVE TAMPA, FL 33602 **Current Mailing Address: New Mailing Address:** 2920 HARBOR VIEW AVENUE WEST 8423 STATE ROAD 674 TAMPA, FL 33611 WIAMUMA, FL 33598 FEI Number: 56-2412650 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: SHASTEEN, PHILIP M 150 SECOND AVE NORTH **SUITE 1100** ST PETERSBURG, FL 33701 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 Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition SHASTEEN, MONICA L Name: Name: 2920 HARBOR VIEW AVENUE Address: Address: City-St-Zip: TAMPA, FL 33611 City-St-Zip: Title: DEVP () Delete Title: () Change () Addition Name: SIZEMORE. JENNIFER L Name: 1601 KEYSVILLE ROAD Address: Address: PLANT CITY, FL 33567 City-St-Zip: 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: JENNIFER L. SIZEMORE DEVP 01/14/2009