

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000141569

Entity Name: SHAWN P. BAILEY, INC.

FILED  
Sep 08, 2004  
Secretary of State

## Current Principal Place of Business:

609 NARDELLO DR.  
DELTONA, FL 32725

## New Principal Place of Business:

3064 NORLINA ST  
DELTONA, FL 32738

## Current Mailing Address:

609 NARDELLO DR.  
DELTONA, FL 32725

## New Mailing Address:

3064 NORLINA ST  
DELTONA, FL 32738

FEI Number: 20-0458354

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BAILEY, SHAWN P  
609 NARDELLO DR.  
DELTONA, FL 32725

## Name and Address of New Registered Agent:

BAILEY, SHAWN P  
3064 NORLINA ST  
DELTONA, FL 32738

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:

09/08/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P VTS ( ) Delete  
Name: BAILEY, SHAWN P  
Address: 609 NARDELLO DR.  
City-St-Zip: DELTONA, FL 32725

Title: D ( ) Delete  
Name: BAILEY, SHAWN P  
Address: 609 NARDELLO DR.  
City-St-Zip: DELTONA, FL 32725

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: BAILEY, SHAWN P P  
Address: 3064 NORLINA ST  
City-St-Zip: DELTONA, FL 32738

Title: VP (X) Change ( ) Addition  
Name: BAILEY, TRACY R VP  
Address: 3064 NORLINA ST  
City-St-Zip: DELTONA, FL 32738

Title: T ( ) Change (X) Addition  
Name: BAILEY, SHAWN P T  
Address: 3064 NORLINA ST  
City-St-Zip: DELTONA, FL 32738

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: SHAWN P BAILEY

P

09/08/2004

Electronic Signature of Signing Officer or Director

Date