## 2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

## Aug 18, 2005 8:00 am Secretary of State 07-27-2005 90043 022 \*\*\*150.00 **DOCUMENT # P04000049942** 1. Entity Name DAVID SHORTT, INC. Principal Place of Business Mailing Address 6602**5957** 21509 RIDGELINE CT 21509 RIDGELINE CT CHRISTMAS, FL 32709 CHRISTMAS, FL 32709 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 07222005 CR2E034 (10/03) City & State City & State 4. FFI Number Applied For 20-066421 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SHORTT, DAVID 21509 RIDGELINE CT Street Address (P.O. Box Number is Not Acceptable) CHRISTMAS, FL 32709 City Zip Coda a. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. (NOTE: Registered Agent signature required when rainstating) Signature, hipsel or printed name of registered agent and trie if applicable. 9. Election Campaign Financing FILE NOW!!! FEE 18 \$150.00 \$5.00 May Ba In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Due by September 7, 2005 Trust Fund Contribution. OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE TITLE PRES. Delete ☐ Change Æ Addition DAVID SHORTT 21509 RIDGELINE CT. NAME MARKE STREET ADDRESS STREET ADDRESS CHRISTMAS, FL CITY-ST-ZIP CITY-ST-ZIP MILE ☐ Deleta TITLE ☐ Change ☐ Addition NUME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete MLE Chance ☐ Add lion MAME HIME STREET ADDRESS STREET ADDRESS CITY-ST-2P CITY-SI-ZIP TITLE TITLE Delete ☐ Change . ☐ Addition NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP TIT) F ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZP CITY-ST-ZIP TITLE ☐ Dateta TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZP CITY-ST-7/P 12. I hereby certify that the information supplied with this filing does not qualify 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 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 invitee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment that nationally all other like empowered.

**FILED** 



ATTACHMENT 66025957

## FLORIDA DEPARTMENT OF STATE Glenda E. Hood

Secretary of State

July 29, 2005

DAVID SHORTT, INC. 21509 RIDGELINE CT CHRISTMAS, FL 32709

Subject: DAVID SHORTT, INC.

Reference Number:

P04000049942

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/sc ANNUAL REPORTS SECTION