

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 20, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # P04000066123**

1. Entity Name  
IT'S A "SHORE" THING, INC.



Principal Place of Business  
3925 W. COUNTY HWY. 30-A  
SUITE F  
SANTA ROSA BEACH, FL 32459

Mailing Address  
3925 W. COUNTY HWY. 30-A  
SUITE F  
SANTA ROSA BEACH, FL 32459



02132006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
20-1060036

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

PORATH, SHANNON L  
56 SPIRES LANE  
16A  
SANTA ROSA BEACH, FL 32459

**DO NOT WRITE  
IN THIS SPACE**

6. 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

Signature, typed or printed name of registered agent and file if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE P  
NAME WARWICK, JENNIFER  
STREET ADDRESS 40 COURTYARD CIRCLE  
CITY-ST-ZIP SANTA ROSA BEACH, FL 32459

TITLE VP  
NAME STAPLETON, JO ANN  
STREET ADDRESS 50 NORTH MAPLE STREET  
CITY-ST-ZIP SANTA ROSA BEACH, FL 32459

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

0000001473657  
03/31/06-80026-001 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Jo Anne Stapleton*