

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000147357

Entity Name: SHANNON D. MAY, P.A.

FILED  
Aug 21, 2006  
Secretary of State

## Current Principal Place of Business:

12555 BISCAYNE BLVD., SUITE #971  
NORTH MIAMI, FL 331812597 US

## New Principal Place of Business:

12555 BISCAYNE BLVD. STE #971  
NORTH MIAMI, FL 331812597 US

## Current Mailing Address:

12555 BISCAYNE BLVD., SUITE #971  
NORTH MIAMI, FL 331812597 US

## New Mailing Address:

12555 BISCAYNE BLVD. STE #971  
NORTH MIAMI, FL 331812597 US

FEI Number: 20-1799169

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MAY, SHANNON  
1935 KEYSTONE BLVD. NORTH  
MIAMI, FL 33181 US

## Name and Address of New Registered Agent:

MAY, SHANNON D  
1935 KEYSTONE BLVD. NORTH  
MIAMI, FL 33181 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: SHANNON D. MAY

08/21/2006

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: PD ( ) Delete  
Name: MAY, SHANNON  
Address: 1935 KEYSTONE BLVD., NORTH  
City-St-Zip: NORTH MIAMI, FL 33181 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: MAY, SHANNON D  
Address: 1935 KEYSTONE BLVD., NORTH  
City-St-Zip: NORTH MIAMI, FL 33181 US

I hereby certify that the information supplied with this filing does not qualify for the 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: SHANNON D. MAY

PRES

08/21/2006

Electronic Signature of Signing Officer or Director

Date