2007 FOR PROFIT CORPORATION ANNUAL REPORT

May 03, 2007 8:00 am Secretary of State **DOCUMENT # P04000151202** 1. Entity Name 05-03-2007 90041 017 ***150.00 DAVID SHADWELL, INC. Principal Place of Business Mailing Address 410 4TH STREET SOUTH 401080--422 5TH AVE SOUTH JACKSONVILLE BEACH, FL 32250 JACKSONVILLE BEACH, FL 32250 No Chg-P 04262007 CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 05-0611721 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent O'NEILL, KAREN B DO NOT WRITE 1009 21ST STREET N JACKSONVILLE BEACH, FL 32250 IN THIS SPACE 8. 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 egent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 > 1 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550:00 10. OFFICERS AND DIRECTORS DPVS 😗 🗇 TITLE SHADWELL, DAVID NAME STREET ADDRESS 410 4TH STREET SOUTH JACKSONVILLE BEACH, FL 32250 C/TY-ST-7IP TITLE SHADWELL, DAVID NAME 410 4TH STREET SOUTH STREET ADDRESS CITY-ST-ZIP JACKSONVILLE BEACH, FL 32250 TIFLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

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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 busted 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 with any address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP