2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000002477

Entity Name: SHAWN M. FOLBERG, MBA, CPA, PA

FILED Apr 11, 2009 Secretary of State

Current Pi	rincipal Pla	ce of Business:	New Principal Place o	New Principal Place of Business:	
2435 US H 540 HOLIDAY,					
Current Mailing Address:			New Mailing Address	New Mailing Address:	
POST OFFICE BOX 1131 PORT RICHEY, FL 34673			2435 US HWY 19 540 HOLIDAY, FL 34691	540	
FEI Number:	56-2537979	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
FOLBERG 2435 US H 540 HOLIDAY,		Js			
	named entit of Florida.	ry submits this statement for the	purpose of changing its registered	office or registered agent, or both,	
SIGNATUR	RE:				
Electronic Signature of Registered Agent			gent	Date	
Election Can	npaign Financ	ing Trust Fund Contribution ().			
OFFICERS	S AND DIRE	CTORS:	ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name:	FOLBERG, \$	() Delete SHAWN CPA	Title: (Name:	() Change() Addition	

2435 US HWY 19, SUITE 540 Address: City-St-Zip: HOLIDAY, FL 34691 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: SHAWN M. FOLBERG Ρ 04/11/2009