## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000090729

Entity Name: SHAFFER ACQUISITIONS, INC.

FILED Jan 27, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Jurrent Principal Place of Business:	New Principal Place of Business:

101 SW 203RD AVENUE 20851 JOHNSON STREET PEMBROKE PINES, FL 33029

SUITE 109

PEMBROKE PINES, FL 33029

**Current Mailing Address:** New Mailing Address:

101 SW 203RD AVENUE 20851 JOHNSON STREET SUITE 109

PEMBROKE PINES, FL 33029

PEMBROKE PINES, FL 33029

FEI Number: 57-1240314 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SHAFFER, JOHN P SHAFFER, JOHN P 20851 JOHNSON STREET 101 SW 203RD AVENUE

PEMBROKE PINES, FL 33029 US SUITE 109 PEMBROKE PINES, FL 33029 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: 01/27/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition

SHAFFER, JOHN P SHAFFER, JOHN P Name: Name: 101 SW 203RD AVENUE 20851 JOHNSON STREET, SUITE 109 Address: Address:

City-St-Zip: PEMBROKE PINES, FL 33029 City-St-Zip: PEMBROKE PINES, FL 33029

Title: Title: (X) Change ( ) Addition () Delete

SHAFFER, NICHOLAS S Name: Name: SHAFFER, NICHOLAS S

101 SW 203RD AVENUE 20851 JOHNSON STREET, SUITE 109 Address: Address: PEMBROKE PINES, FL 33029 PEMBROKE PINES, FL 33029 City-St-Zip: City-St-Zip:

Title: Title: (X) Change ( ) Addition ( ) Delete

SHAFFER, MICHAEL J Name: SHAFFER, MICHAEL J Name: 101 SW 203RD AVENUE Address: 20851 JOHNSON STREET, SUITE 109 Address:

City-St-Zip: PEMBROKE PINES, FL 33029 City-St-Zip: PEMBROKE PINES, FL 33029

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.

Ρ SIGNATURE: JOHN P. SHAFFER 01/27/2009