

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000010276

FILED
Apr 27, 2008
Secretary of State

Entity Name: RENEE' NORMANDY-SHANE, P.A.

Current Principal Place of Business:

414 N.W. STRATFORD LANE
PORT ST. LUCIE, FL 33983

New Principal Place of Business:

414 N.W. STRATFORD LANE
PORT ST. LUCIE, FL 34983

Current Mailing Address:

414 N.W. STRATFORD LANE
PORT ST. LUCIE, FL 33983

New Mailing Address:

414 N.W. STRATFORD LANE
PORT ST. LUCIE, FL 34983

FEI Number: 20-8384627

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NORMANDY-SHANE, RENEE'
414 N.W. STRATFORD LANE
PORT ST. LUCIE, FL 33983 US

Name and Address of New Registered Agent:

NORMANDY-SHANE, RENEE'
414 N.W. STRATFORD LANE
PORT ST. LUCIE, FL 34983 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:

04/27/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: NORMANDY-SHANE, RENEE'
Address: 414 N.W. STRATFORD LANE
City-St-Zip: PORT ST. LUCIE, FL 33983

Title: VD () Delete
Name: SHANE, RONALD
Address: 414 N.W. STRATFORD LANE
City-St-Zip: PORT ST. LUCIE, FL 33983

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: NORMANDY-SHANE, RENEE'
Address: 414 N.W. STRATFORD LANE
City-St-Zip: PORT ST. LUCIE, FL 34983

Title: VD (X) Change () Addition
Name: SHANE, RONALD
Address: 414 N.W. STRATFORD LANE
City-St-Zip: PORT ST. LUCIE, FL 34983

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: RENEE' NORMANDY-SHANE

PD

04/27/2008

Electronic Signature of Signing Officer or Director

Date