

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000102627

Entity Name: SHEARWONDERS INC.

FILED  
Mar 24, 2008  
Secretary of State

## Current Principal Place of Business:

1226 TOSCANO DR.  
TRINITY, FL 34655 US

## New Principal Place of Business:

31822 U.S. HWY. 19 NORTH  
PALM HARBOR, FL 34684 US

## Current Mailing Address:

1226 TOSCANO DR.  
TRINITY, FL 34655 US

## New Mailing Address:

1226 TOSCANO DRIVE  
TRINITY, FL 34655 US

FEI Number: 26-1082856

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

AMERICAN SAFETY COUNCIL, INC.  
5125 ADANSON ST. SUITE 500  
ORLANDO, FL 32804 US

## Name and Address of New Registered Agent:

ARMANDO F. MIZIO  
25400 U.S. HWY 19 NORTH - SUITE 210  
CLEARWATER, FL 33763 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: ARMANDO F. MIZIO

03/24/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VP ( ) Delete  
Name: TOSCANO, KRISTY  
Address: 132 BAYWOOD AVE.  
City-St-Zip: CLEARWATER, FL 33765 US

Title: P D ( ) Delete  
Name: TOSCANO, GINA  
Address: 1226 TOSCANO DR.  
City-St-Zip: TRINITY, FL 34655 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change ( ) Addition  
Name: TOSCANO, GINA M  
Address: 1226 TOSCANO DRIVE  
City-St-Zip: TRINITY, FL 34655 US

Title: VPSD (X) Change ( ) Addition  
Name: TOSCANO, KRISTY A  
Address: 132 BAYWOOD AVENUE  
City-St-Zip: CLEARWATER, FL 33765 US

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: GINA M. TOSCANO

PTD

03/24/2008

Electronic Signature of Signing Officer or Director

Date