

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000012058

Entity Name: FEDERAL VERIFICATION CO., INC.

FILED  
Apr 22, 2009  
Secretary of State

## Current Principal Place of Business:

1059 BROADWAY  
SUITE G  
DUNEDIN, FL 34698 US

## New Principal Place of Business:

334 EAST LAKE RD.  
PALM HARBOR, FL 34685 US

## Current Mailing Address:

P.O. BOX 1735  
OLDSMAR, FL 34677 US

## New Mailing Address:

334 EAST LAKE RD.  
PALM HARBOR, FL 34685 US

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SHAWN, YVONNE  
477 COMMERCE BLVD  
OLDSMAR, FL 34677 US

## Name and Address of New Registered Agent:

SHAWN, YVONNE  
2256 TONIWOOD DR.  
PALM HARBOR, FL 34685 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: YVONNE SHAWN

04/22/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: SHAWN, YVONNE  
Address: 2256 TONIWOOD DR,  
City-St-Zip: PALM HARBOR, FL 34684 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: SHAWN, YVONNE  
Address: 2256 TONIWOOD DR,  
City-St-Zip: PALM HARBOR, FL 34685 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: YVONNE SHAWN

PRES

04/22/2009

Electronic Signature of Signing Officer or Director

Date