

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000094885

**FILED**  
**Feb 28, 2012**  
**Secretary of State**

**Entity Name:** SHADOWCREEK CAPITAL INC.

**Current Principal Place of Business:**

3070 W BERMUDA DUNES DRIVE  
LECANTO, FL 34461

**New Principal Place of Business:**

**Current Mailing Address:**

8497 LAKESHORE RD  
ANGOLA, NY 14006

**New Mailing Address:**

**FEI Number:** 27-4010872

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

EDWARD J SERRA CPA PLLC  
6118 W CORPORATE OAKS DRIVE  
CRYSTAL RIVER, FL 34429 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: FORSTER, HOLORY  
Address: 8497 LAKESHORE RD  
City-St-Zip: ANGOLA, NY 14006

I hereby 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 all other like empowered.

SIGNATURE: HILORY FORSTER

P

02/28/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date