## **2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)**

SIGNATURE:

## May 22, 2006 8:00 am Secretary of State **DOCUMENT # P93000026063** 05-22-2006 90048 017 \*\*\*150.00 1. Entity Name SHANE STABLE, INC. Principal Place of Business Mailing Address 33830 GRAND CHAMPION LN 1407 BELMONT DR EUSTIS FL 32736 ORLANDO FL 32806 2. Principal Place of Business 3. Mailing Address 33830 GRAND CHAMPION LAWE Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/05) City & State City & State Applied For 4. FEI Number 59-3173314 Eusus Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 32736 FUKE Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) 33830 GRAND CHAMPLON CANE CONNELLY, SHANE 1407 BELMONT DRIVE ORLANDO FL 32806 Zip Code EUSTIS 32736 8. 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. I am familiar with, and accept SIGNATURE FILE NOW!!! FEE IS \$150.00 .. 9. Election Campaign Financing \$5.00 May Be After May 1, 2006 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS TITLE PD ☐ Delete TITLE ☐ Change ☐ Addition CONNELLY, SHARE NAME CONNELLY, SHANE NAME 33830 GRAND CHAMPION LN STREET ADDRESS 1407 BELMONT DR STREET ADDRESS CITY-ST-ZIP ORLANDO FL 32806 CITY-ST-7tP EUSTIS FL 3273 6 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME HAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete Addition TITLE TITLE Change NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE THTLE Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST- ZIP CITY-ST-7IP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**FILED** 

352-357-72/1

3/15/06 407-\$761-2969