2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2005
Secretary of State

DOCUMENT# P94000041926

Entity Name: SHUMAN ENTERPRISES, INC.

Current Principal Place of Business:

18350 PAULSON DRIVE
PORT CHARLOTTE, FL 33954

New Principal Place of Business:

18350 PAULSON DRIVE
PORT CHARLOTTE, FL 33954 US

Current Mailing Address:

18350 PAULSON DRIVE
PORT CHARLOTTE, FL 33954

New Mailing Address:

18350 PAULSON DRIVE
PORT CHARLOTTE, FL 33954 US

FEI Number: 65-0517958 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

SHUMAN, AL
18350 PAULSON DRIVE
PORT CHARLOTTE, FL 33954 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: SHUMAN, AL
Address: 18350 PAULSON DRIVE
City-St-Zip: PORT CHARLOTTE, FL 33954

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: SHUMAN, AL
Address: 18350 PAULSON DRIVE
City-St-Zip: PORT CHARLOTTE, FL 33954 US

Title: O ( ) Change (X) Addition
Name: SHUMAN, LINDA
Address: 18350 PAULSON DRIVE
City-St-Zip: PORT CHARLOTTE, FL 33954 US

Title: O ( ) Change (X) Addition
Name: SHUMAN, ANDY
Address: 18350 PAULSON DRIVE
City-St-Zip: PORT CHARLOTTE, FL 33954 US

Title: O ( ) Change (X) Addition
Name: SHUMAN, CONNIE
Address: 18350 PAULSON DRIVE
City-St-Zip: PORT CHARLOTTE, FL 33954 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: AL SHUMAN D 03/21/2005

Electronic Signature of Signing Officer or Director — Date