2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000088688

Entity Name: SHELBY DRIVE CORPORATION

FILED Jan 30, 2006 Secretary of State

That sales of the source of the sales of the								
Current Principal Place of Business:				New Principal Place of Business:				
	MITAGE BLVD SSEE, FL 323							
Current Mailing Address:				New Mailing Address:				
	MITAGE BLVD SSEE, FL 323							
FEI Number:	75-2571016	FEI Number Applied For ()	FEI Nun	nber Not Appl	icable ()	Certificate of Status Desired ()		
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:				
DAVID E. TODD 1801 HERMITAGE BLVD. STE 100 TALLAHASSEE, FL 32308 US				CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US				
	named entity : e of Florida.	submits this statement for the p	urpose o	f changing i	ts registered	office or registered agent, or both,		
SIGNATURE: CARRIE D COOPER				01/30/2006				
	Electror	ic Signature of Registered Age	nt			Date		
Election Car	npaign Financin	g Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:					
Title: Name: Address: City-St-Zip:	BENNETT, DOL	GE BLVD., SUITE 600		Title: Name: Address: City-St-Zip:	() Change ()Addition		
Title: Name: Address: City-St-Zip:	SMITH, JEFFR	GE BLVD., SUITE 600		Title: Name: Address: City-St-Zip:	() Change ()Addition		
Title: Name: Address: City-St-Zip:	GRAY, LYNNE	GE BLVD., SUITE 600		Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	HORTON, JAM	AL EXPRESSWAY SUITE 800		Title: Name: Address: City-St-Zip:	HANSON, JEN	RAL EXPRESSWAY SUITE 800		
Title: Name: Address: City-St-Zip:	SMITH, G AND	AL EXPRESSWAY SUITE 800		Title: Name: Address: City-St-Zip:	() Change ()Addition		
Title: Name: Address:	FARALDO, MAI	Delete RK P AL EXPRESSWAY, SUITE 800		Title: Name: Address:	() Change () Addition		

I hereby certify that the information supplied with this filing does not qualify for the 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.

City-St-Zip:

SIGNATURE:	G ANDREWS SMITH	Р	01/30/2006	
Electronic Signature of Signing Officer or Director			Data	

City-St-Zip:

TALLAHASSEE, FL 32308