## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P95000010702

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Entity Name: HABITAT MODIFICATIONS BY SHAG, INC.

FILED Apr 14, 2009 Secretary of State

rincipal Place of Business:	New Principal Place of Business:
NDER DRIVE ISLAND, FL 32952	630 OLEANDER DRIVE MERRITT ISLAND, FL 32952 US
failing Address:	New Mailing Address:
N'S LANE ISLAND, FL 329525306 US	450 DARINS LANE MERRITT ISLAND, FL 32952 US
: 59-3288469 FEI Number Applied For (	) FEI Number Not Applicable ( ) Certificate of Status Desired ( )
d Address of Current Registered Agen	t: Name and Address of New Registered Agent:
Γ, HERBERT A  NDER DRIVE ISLAND, FL 32952 US  e named entity submits this statement for	the purpose of changing its registered office or registered agent, or both,
e of Florida.	
RE:	
Electronic Signature of Registere	d Agent Date
mpaign Financing Trust Fund Contribution ( )	
S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR
D ( ) Delete TENNANT, HERBERT A 450 DARIN'S LANE	Title: ( ) Change ( ) Addition Name: Address:
MERRITT ISLAND, FL 32952	City-St-Zip:
MERRITT ISLAND, FL 32952  D ( ) Delete TENNANT, DARIN N 450 DARIN'S LANE MERRITT ISLAND, FL 32952	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
	NDER DRIVE ISLAND, FL 32952  failing Address:  N'S LANE ISLAND, FL 329525306 US  : 59-3288469 FEI Number Applied For ( d Address of Current Registered Agent T, HERBERT A NDER DRIVE ISLAND, FL 32952 US  e named entity submits this statement for e of Florida.  RE:  Electronic Signature of Registered mpaign Financing Trust Fund Contribution ( ).  S AND DIRECTORS:  D ( ) Delete TENNANT, HERBERT A

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:	DARIN TENNANT	D 04/14/2009	
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