2001 UNIFORM BUSINESS REPORT (UBR)

FILED Apr 19, 2001 8:00 am Secretary of State DOCUMENT # **P95000034303** RICHARD S. SHANAHAN, INC. 04-19-2001 90330 017 ***150.00 Principal Place of Business Mailing Address 427 BARCELONA COURT 427 BARCELONA COURT MARCO ISLAND FL 33937 MARCO ISLAND FL 33937 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEL Number 65-0578640 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Bequired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SHANAHAN, RICHARD S Street Address (P.O. Box Number is Not Acceptable) **427 BARCELONA COURT** MARCO ISLAND FL 33937 34145 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) \Box Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE Addition SHANAHAN, RICHARD S NAME NAME STREET ADDRESS **427 BARCELONA COURT** STREET ADDRESS CITY-ST-ZIP MARCO ISLAND FL 33937 CITY-ST-7IP TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify 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 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 11 or Block 12 if changed, or on an attach

KICHARD S. SHANAHAN 413.01 394-1268