

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000053870

Entity Name: SHANNON INTERIORS, INC.

FILED
May 01, 2006
Secretary of State

Current Principal Place of Business:

6250 NW 23RD STREET
SUITE 8
GAINESVILLE, FL 32653 US

New Principal Place of Business:

Current Mailing Address:

6250 NW 23RD STREET
SUITE 8
GAINESVILLE, FL 32653 US

New Mailing Address:

FEI Number: 59-3338528

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMS, JIMMY
4424 NW 13TH ST
GAINESVILLE, FL 32609 US

Name and Address of New Registered Agent:

WILLIAMS, JIMMY
4424 NW 13TH ST
SUITE B-1
GAINESVILLE, FL 32609 US

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:

05/01/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SHANNON, CATHY R
Address: 6250 NW 23RD 97TH BLVD, STE 8
City-St-Zip: GAINESVILLE, FL 32606

Title: VP () Delete
Name: SHANNON, MICHAEL
Address: 3921 NW 97TH BLVD
City-St-Zip: GAINESVILLE, FL 32606

Title: S () Delete
Name: RIVERS, MARGARET
Address: 3921 NW 97TH BLVD
City-St-Zip: GAINESVILLE, FL 32606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: MICHAEL SHANNON

VP

05/01/2006

Electronic Signature of Signing Officer or Director

Date