2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000066861

Entity Name: SHIVER YBOR HOLDINGS, INC.

FILED Apr 08, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
1915 REP TAMPA, F	UBLICA DE CU L 33605 US			
Current Mailing Address:			New Mailing Address:	
1915 REP TAMPA, F	UBLICA DE CU L 33605 US			
FEI Number	: 59-3397745	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:
1243 LAKE	R, BERNARD J EVIEW ROAD ATER, FL 346	I6 US		
	e named entity s e of Florida.	submits this statement for the p	purpose of changing its registere	ed office or registered agent, or both,
SIGNATUI	RE:			
Electronic Signature of Registered Age			ent	Date
Election Car	mpaign Financin	Trust Fund Contribution ().		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	PD () SHIVER, JULIU 1915 N. 14TH S TAMPA, FL 33	ST.	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	S () SHIVER, TESS. 1915 N. 14TH. TAMPA, FL 33	ST.	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	T () SHIVER, DAMO 1915 N. 14TH S TAMPA, FL 33	ST.	Title: Name: Address: City-St-Zip:	() Change () Addition

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: DAMON SHIVER CFO 04/08/2009