

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000045516

Entity Name: SHORELINE INDUSTRIES, INC.

FILED
Apr 16, 2009
Secretary of State

Current Principal Place of Business:

30375 QUAILROOST TRAIL
UNIT F
BIG PINE KEY, FL 33043

Current Mailing Address:

PO BOX 430498
BIG PINE KEY, FL 33043

New Principal Place of Business:

28340 COUNTY ROAD
UNIT B
LITTEL TORCH KEY, FL 33042

New Mailing Address:

FEI Number: 65-0124049

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STARR, NANCY B
30375 QUAILROOST TRAIL
BIG PINE KEY, FL 33043 US

Name and Address of New Registered Agent:

STARR, NANCY B
UNIT B 28340 COUNTY ROAD
LITTLE TORCH KEY, FL 33042 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:

04/16/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: STARR, NANCY B
Address: 30375 QUAILROOST TRAIL
City-St-Zip: BIG PINE KEY, FL 33043

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: STARR, NANCY B
Address: UNIT B 28340 COUNTY ROAD
City-St-Zip: LITTLE TORCH KEY, FL 33042

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: NANCY B STARR

CEO

04/16/2009

Electronic Signature of Signing Officer or Director

Date