

**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**DOCUMENT # S22521**

1. Entity Name  
SHANKLE FINANCIAL CORP.



Principal Place of Business  
206 PARKSIDE PLACE  
INDIAN HARBOUR BEACH, FL 32937 US

Mailing Address  
206 PARKSIDE PLACE  
INDIAN HARBOUR BEACH, FL 32937 US

**DO NOT WRITE IN THIS SPACE**

**FILED  
Feb 24, 2005 8:00 am  
Secretary of State**

02-24-2005 90035 034 \*\*\*150.00



01062005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3048398	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required

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IN THIS SPACE**

6. Name and Address of Current Registered Agent

SHANKLE, HENRY M.  
1904 SOUTH HARBOR CITY BLVD.  
SUITE 600  
MELBOURNE, FL 32904-206 Parkside Place  
Indian Harbor Beach FL 32937

7. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: *Henry M. Shankle*

Signature, typed or printed name of registered agent and title if applicable.

DATE

*2-19-05*

8. FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing  
Trust Fund Contribution.  \$5.00 May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE: D  
NAME: SHANKLE, HENRY M.  
STREET ADDRESS: 206 PARKSIDE PLACE  
CITY-ST-ZIP: INDIAN HRBR. BCH, FL 32937

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Henry M. Shankle* Henry M. Shankle 2-19-05 773-0547

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

321-