## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

Mar 22, 2004 08:00 AM — **DOCUMENT # S29189 Secretary of State** 1. Entity Name SHANER'S, INC. Principal Place of Business Mailing Address 3578 CLARK RD 3578 CLARK RD SARASOTA, FL 34231 SARASOTA, FL 34231 03182004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0252310 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent RAWLEY, SHANE DO NOT WRITE 3578 CLARK RD SARASOTA, FL 34-231° IN THIS SPACE 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typod or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE U00000093365 03/22/04-80014-022 150.00 FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be  $\Box$ Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. THE RAWLEY, SHANE W NAME STREET ADDRESS 4945 SILKWOOD DR City-ST-ZIP SARASOTA, FL 34241 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE HAME, STREET ADDRESS DO NOT WRITE CITY-\$7-ZP 33313 IN THIS SPACE STREET ADDRESS City-ST-ZIP TELE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZP 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 of trustee empowered to execute this export as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 13 if changed, or on an attachment with an address, with all other tips empowered.

PED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**FILED**