


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 17, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # S29189</b> 1. Entity Name <b>SHANER'S, INC.</b>					
Principal Place of Business <b>3578 CLARK RD SARASOTA FL 34231</b>			Mailing Address <b>3578 CLARK RD SARASOTA FL 34231</b>		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		4. FEI Number <b>65-0252310</b>	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent  <b>RAWLEY, SHANE 3578 CLARK RD SARASOTA FL 34-2310</b>				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
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 _____ (NOTE: Registered Agent signature required when registering)					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2006 Fee Will Be \$550.00</b> <b>Make Check Payable to Florida Department of State</b>				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	
<b>\$5.00 May Be Added to Fees</b>					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP <b>P RAWLEY, SHANE W 4945 SILKWOOD DR SARASOTA FL 34241</b>			TITLE NAME STREET ADDRESS CITY-ST-ZIP <b>000000471429 03/28/06-80053-024 150.00</b>		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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.					
<b>SIGNATURE:</b> <i>Shane Rawley</i> <b>3/10/06 941 925-455</b>					