

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S87921

FILED
Apr 15, 2008
Secretary of State

Entity Name: SHORELINE RV & MOBILE HOME REPAIR, INC.

Current Principal Place of Business:

10967 S. OCEAN DRIVE
JENSEN BEACH, FL 34957

New Principal Place of Business:

Current Mailing Address:

10967 S. OCEAN DRIVE
JENSEN BEACH, FL 34957

New Mailing Address:

FEI Number: 65-0292528

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MURRAY, RICHARD F.
10967 SOUTH OCEAN DRIVE
JENSEN BEACH, FL 34957 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MURRAY, RICHARD F.,
Address: POST OFFICE BOX 1228 N/A
City-St-Zip: JENSEN BEACH, FL 349581228 US

Title: S () Delete
Name: MURRAY, BRANDI L
Address: 2653 NE SPRUCE RIDGE AVE.
City-St-Zip: JENSEN BEACH, FL 34957 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: RICHARD MURRAY

PD

04/15/2008

Electronic Signature of Signing Officer or Director

Date