FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B Mortham

Secretary of State

1996

DOCUMENT # V56669

(7)

Corporation Name

SIGNATURE:

SIGNATURE AND TIPEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

THE SHAKER CORPORATION

Principal Place o	of Business	Mailing Ac	idress				BUILD 1014 D1641 019		HII Bib ib iu b i	
15310 AMBERL	Y DRIVE	15310 A	MBERLY DRIVE							
SUITE 250 SUITE 250										
TAMPA FL 336	47	IAMPA	TAMPA FL 33647			3. Date Incorporated or Qualified 3a. Date of Last 08/11/1992 05/01/1		e of Last Rep 5/01/1995		
2. Principal Plac	ce of Business	2a. Mailing	g Address			4. FEI Number		At	plied For	
21		26				59-3140609			ot Applicable	
Suite, Apt. #,	etc.	Suite,	Apt. #, etc.			5. Certificate of Status Desired	[†] 🗆	\$8.75 A		
City & State		City &	State			Election Campaign Financin Trust Fund Contribution	ig 🗀	\$5.00 Added	May Be to Fees	
Zip	Country	Zip		Countr	у	8. This corporation has liability	for intangible t			
	25	29		30		Florida Statutes	Yes No			
	9. Name and Address of Curr	rent Registered A	Agent			10. Name and Address of Ne	w Registered	Agent		
:	•			81	Name					
KAELIN, (82	Street Addr	ress (P.O. Box Number is Not Acce	ptable)			
	IBERLY DRIVE									
SUITE 25				83	2					
tampa fi	L 33647			8	City		FL	85 Zip	Code	
11. Pursuant to or registere	the provisions of Sections 607.05 d agent, or both, in the State of Fl	502 and 607.1508 londal Such chang	Florida Statut je was authoriz	tes, the above ed by the cor	named corpor poration's boar	ration submits this statement for the rd of directors. I hereby accept the	e purpose of ch appointment a	anging its re s registered a	gistered offic agent. I am	
familiar with	i, and alcept the obligations of, Se	echn 607.0505, F	-londa Statutes	ŝ			4/15	190		
	C//w									
SIGNATURE .		gertand tre itaspirate	(14)		erit Siçlend ^k arısı (çe pür. :		DA'E	O DIDECTOR	S IN: 10	
SIGNATURE .	OFFICERS A	AND DIRECTORS		13.	······································	e whe revisition; ADDITIONS/CHANGES TO	OFFICERS AN			
SIGNATURE	D OFFICERS A	AND DIRECTORS	OELĒTE	13.			OFFICERS AN	D DIRECTOF Change	IS IN 12	
SIGNATURE S 12. TITLE	D KAELIN, CRAIG J.	AND DIRECTORS		13. 1 1 TITLE 1 2 NAME			OFFICERS AN			
SIGNATURE S 12. TITLE NAME STREET ADDRESS	D KAELIN, CRAIG J. 17820 GREY BROOKE DRI	AND DIRECTORS		13. 1 1 TITLE 1 2 NAME 1 3 STREE	L ADDRESS		OFFICERS AN			
SIGNATURE 12. TITLE NAME SIREET ADDRESS CITY-ST-Z-P	D KAELIN, CRAIG J.	AND DIRECTORS		13. 1 1 TITLE 1 2 NAME	LI ADDRESS ST-ZIP		OFFICERS AN			
SIGNATURE S	D KAELIN, CRAIG J. 17820 GREY BROOKE DRI TAMPA FL D	AND DIRECTORS	□ DELETE	13. 1 1 TITLE 1 2 NAME 1 3 STBEL 1.4 CITY	LADDRESS ST-ZIP		OFFICERS AN	☐ Change	Addition	
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-Z P TITLE	D KAELIN, CRAIG J. 17820 GREY BROOKE DRI TAMPA FL	AND DIRECTORS	□ DELETE	13. 1 1 TITLE 1 2 NAME 1 3 STBEE 1 4 CHY 2 1 THLE 2 2 NAME	LADDRESS ST-ZIP		OFFICERS AN	☐ Change	Addition	
SIGNATURE 12. TITLE NAME SIREET ADDRESS CITY-SI-Z P TITLE NAME	D KAELIN, CRAIG J. 17820 GREY BROOKE DRI TAMPA FL D KAELIN, SHARON E.	AND DIRECTORS	□ DELETE	13. 1 1 TITLE 1 2 NAME 1 3 STBEE 1 4 CHY 2 1 THLE 2 2 NAME	ET ADDRESS		OFFICERS AN	☐ Change	Addition	
SIGNATURE 12. TITLE NAME SIREET ADDRESS CITY-SI-Z P TITLE NAME	D KAELIN, CRAIG J. 17820 GREY BROOKE DRI TAMPA FL D KAELIN, SHARON E.	AND DIRECTORS VE	□ DELETE	13. 1 1 TELF 1 2 NAME 1 3 STREE 1.4 CITY 2 1 TILLE 22 NAME 23 STREE	ET ADDRESS ET ADDRESS -ST-ZIP		OFFICERS AN	☐ Change	Addition	
SIGNATURE 12. TITLE NAME SIREET ADDRESS CITY-ST-Z-P TITLE NAME COEST ADDRESS	D KAELIN, CRAIG J. 17820 GREY BROOKE DRI TAMPA FL D KAELIN, SHARON E.	AND DIRECTORS VE	DELETE	13. 1 1 174 1 2 NAME 1 3 STHE 1 4 CHY 2 1 THE 2 2 NAME 2 3 SHE 2 4 CHY	ET ADDRESS ET ADDRESS ST-ZIP		OFFICERS AN	☐ Change	Addition	
SIGNATURE 12. TITLE NAME SIREET ADDRESS CITY-ST-Z-P TITLE NAME COSST ADDRESS TITLE NAME	D KAELIN, CRAIG J. 17820 GREY BROOKE DRI TAMPA FL D KAELIN, SHARON E.	AND DIRECTORS VE	DELETE	13. 1 1 1714 1 2 NAM 1 3 STRE 1 4 CITY 2 1 THLE 2 2 NAM 2 3 STME 2 4 CITY 3 1 THLE 3 2 NAM	ET ADDRESS ET ADDRESS ST-ZIP		OFFICERS AN	☐ Change	Addition	
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-Z-P TITLE NAME CTOCKLADDRESS TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KAELIN, CRAIG J. 17820 GREY BROOKE DRI TAMPA FL D KAELIN, SHARON E.	AND DIRFCTORS VE	DELETE	13. 1 1 1714 1 2 NAM 1 3 STRE 1 4 CITY 2 1 THLE 2 8 NAM 2 3 STRE 2 4 CITY 3 1 THLE 3 2 NAM 3 3 STRE 3 4 CITY	ET ADDRESS ST-ZIP E E ELT ADDRESS -ST-ZIP E E ELT ADDRESS -ST-ZIP		OFFICERS AN	☐ Change ☐ Change ☐ Change	Addition Addition	
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZP TITLE NAME CTOSET ADDRESS TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	D KAELIN, CRAIG J. 17820 GREY BROOKE DRI TAMPA FL D KAELIN, SHARON E.	AND DIRFCTORS VE	DELETE	13. 1 1 11714 1 2 NAM 1 3 STRE 1 4 GIY 2 1 THE 2 2 NAM 2 3 STRE 2 4 CIY 3 1 THE 3 2 NAM 3 3 STRE 3 4 CIY 4 1 THE	ET ADDRESS -ST-ZIP		OFFICERS AN	☐ Change	Addition	
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZP TITLE NAME COSSELADDRESS VITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D KAELIN, CRAIG J. 17820 GREY BROOKE DRI TAMPA FL D KAELIN, SHARON E.	AND DIRFCTORS VE	DELETE	13. 1 1 1174 1 2 NAM 1 3 STRE 1 4 GIY 2 1 THE 2 2 NAM 2 3 STRE 2 4 CIY 3 1 THE 3 2 NAM 3 3 STRE 3 4 CIY 4 1 THE 4 2 NAM	ET ADDRESS ST-ZIP ET ADDRESS -ST-ZIP E ELT ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP E		OFFICERS AN	☐ Change ☐ Change ☐ Change	Addition Addition	
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZP TITLE NAME CTOSET ADDRESS TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	D KAELIN, CRAIG J. 17820 GREY BROOKE DRI TAMPA FL D KAELIN, SHARON E.	AND DIRFCTORS VE	DELETE	13. 1 1 1174 1 2 NAM 1 3 STRE 1 4 CHY 2 1 THE 2 2 NAM 2 3 STRE 2 4 CHY 3 1 THE 3 2 NAM 3 3 STRE 3 4 CHY 4 1 THE 4 2 NAM 4 3 STRE	ET ADDRESS ST-ZIP ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP E ET ADDRESS	ADDITIONS CHANGES TO	8207	☐ Change ☐ Change ☐ Change ☐ Change	Addition Addition	
SIGNATURE S 12. TITLE NAME STREET ADDRESS CITY-ST-ZP TITLE NAME CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KAELIN, CRAIG J. 17820 GREY BROOKE DRI TAMPA FL D KAELIN, SHARON E.	AND DIRFCTORS VE	DELETE DELETE	13. 1 1 1174 1 2 NAM 1 3 STRE 1 4 GIY 2 1 THE 2 2 NAM 2 3 STRE 2 4 CIY 3 1 THE 3 2 NAM 3 3 STRE 3 4 CIY 4 1 THE 4 2 NAM	ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP E E E E E E E E E E E E E E E E E E	900001:05/14/96	8207	☐ Change ☐ Change ☐ Change ☐ Change	Addition Addition Addition	
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	D KAELIN, CRAIG J. 17820 GREY BROOKE DRI TAMPA FL D KAELIN, SHARON E.	AND DIRFCTORS VE	DELETE	13. 1 1 11714 1 2 NAM 1 3 STRE 1 4 CHY 2 1 THE 2 2 NAM 2 3 STRE 2 4 CHY 3 1 THE 3 2 NAM 3 3 STRE 3 4 CHY 4 1 THE 4 2 NAM 4 3 STRE 4 4 CHY 4 3 STRE 4 4 CHY	EL ADDRESS -ST-ZIP	ADDITIONS CHANGES TO	8207	☐ Change ☐ Change ☐ Change ☐ Change	Addition Addition Addition	
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	D KAELIN, CRAIG J. 17820 GREY BROOKE DRI TAMPA FL D KAELIN, SHARON E.	AND DIRFCTORS VE	DELETE DELETE	13. 1 1 1174 1 2 NAM 1 3 STRE 1 4 GIY 2 1 THLE 2 NAM 2 3 STRE 2 4 CIY 3 1 THLE 3 2 NAM 3 3 STRE 4 CIY 4 1 THL 4 2 NAM 4 3 STRE 4 CIY 5 1 THLE 5 2 NAM	EL ADDRESS -ST-ZIP	900001:05/14/96	8207	☐ Change ☐ Change ☐ Change ☐ Change	Addition Addition	
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D KAELIN, CRAIG J. 17820 GREY BROOKE DRI TAMPA FL D KAELIN, SHARON E.	AND DIRFCTORS VE	DELETE DELETE	13. 1 1 1174 1 2 NAM 1 3 STRE 1 4 GIY 2 1 THLE 2 NAM 2 3 STRE 2 4 CIY 3 1 THLE 3 2 NAM 3 3 STRE 4 CIY 4 1 THL 4 2 NAM 4 3 STRE 4 CIY 5 1 THLE 5 2 NAM	ET ADDRESS ST-ZIP ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP E ET ADDRESS	900001:05/14/96	8207	☐ Change ☐ Change ☐ Change ☐ Change	Addition Addition Addition	
SIGNATURE SIGNATURE 12. TITLE NAME SIREET ADDRESS CITY-ST-ZP TITLE NAME SIREET ADDRESS CITY-ST-ZIP TITLE NAME SIREET ADDRESS CITY-ST-ZIP TITLE NAME SIREET ADDRESS CITY-ST-ZIP TITLE NAME SIREET ADDRESS	D KAELIN, CRAIG J. 17820 GREY BROOKE DRI TAMPA FL D KAELIN, SHARON E.	AND DIRFCTORS VE	DELETE DELETE	13. 1 1 1174 1 2 NAM 1 3 STRE 1 4 GIY 2 1 THLE 2 NAM 2 3 STRE 2 4 CIY 3 1 THLE 3 2 NAM 3 3 STRE 4 CIY 4 1 THL 4 NAM 4 3 STRE 4 4 CIY 5 1 THL 5 2 NAM 5 3 STRE	ELADDRESS -ST-ZIP	900001:05/14/96	8207	☐ Change ☐ Change ☐ Change ☐ Change	Addition Addition Addition Addition	
SIGNATURE SIGNATURE ITTLE NAME SIREET ADDRESS CITY-ST-ZP TITLE NAME SIREET ADDRESS CITY-ST-ZIP TITLE NAME SIREET ADDRESS CITY-ST-ZIP	D KAELIN, CRAIG J. 17820 GREY BROOKE DRI TAMPA FL D KAELIN, SHARON E.	AND DIRFCTORS VE	DELETE DELETE DELETE	13. 1 1 11714 1 2 NAM 1 3 STRE 1.4 GIY 2 1 THLE 2 NAM 2 3 STRE 2 4 CIY 3 1 THLE 3 2 NAM 3 3 STRE 4 CIY 4 1 THL 4 NAM 4 3 STRE 4 CIY 5 1 THL 5 2 NAM 5 3 STRE 5 4 CIY	ELADDRESS -ST-ZIP	900001:05/14/96	8207	☐ Change ☐ Change ☐ Change ☐ Change	Addition Addition Addition Addition	
SIGNATURE S 12. TITLE NAME STREET ADDRESS CITY-ST-Z-P TITLE NAME STREET ADDRESS TITLE NAME STREET ADDRESS CITY-ST-Z-P TITLE TITLE	D KAELIN, CRAIG J. 17820 GREY BROOKE DRI TAMPA FL D KAELIN, SHARON E.	AND DIRFCTORS VE	DELETE DELETE DELETE	13. 1 1 1134 1 1 1144 1 2 NAM 1 3 STRE 1 4 GIY 2 1 TILL 2 NAM 2 3 STRE 2 4 CIY 3 1 TILL 3 2 NAM 3 3 STRE 4 TILL 4 NAM 4 3 STRE 4 CIY 5 1 TILL 5 2 NAM 5 3 STRE 5 4 CIY 6 1 TILL 6 2 NAM	ELADDRESS -ST-ZIP	900001:05/14/96	8207	☐ Change ☐ Change ☐ Change ☐ Change	Addition Addition Addition Addition	