

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# L44560

**Entity Name:** SHAW CONSTRUCTION AND MANAGEMENT SERVICES, INC.

**FILED**  
**Apr 14, 2019**  
**Secretary of State**  
**7001558201CC**

**Current Principal Place of Business:**

% LINDA K. SHAW  
386 PINE TREE RD  
LAKE MARY, FL 32746

**Current Mailing Address:**

% LINDA K. SHAW  
386 PINE TREE RD  
LAKE MARY, FL 32746 US

**FEI Number:** 59-2992420

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

SHAW, LINDA K.  
386 PINE TREE RD  
LAKE MARY, FL 32746 US

*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

**Officer/Director Detail :**

Title	PTSD	Title	VD
Name	SHAW, LINDA K.	Name	SHAW, TERRY L
Address	386 PINE TREE RD	Address	386 PINE TREE RD
City-State-Zip:	LAKE MARY FL	City-State-Zip:	LAKE MARY FL

*I hereby 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 all other like empowered.*

**SIGNATURE:** LINDA K SHAW

**PRESIDENT**

**04/14/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date