FILE ON OR BEFORE APRIL 9, 1997 TO AVOID REVOCATION AND $500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1997

FLORIDA DEPARTMENT OF STATE
Sandra Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
97 APR 24 AM 11:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Name of Limited Partnership

1a. DOCUMENT # A16450

SHELTER SEAGATE ASSOCIATES, LTD.

97-AR-Cus
CM

Mailing Address	Principal Office Address
~~BARNETT CENTER~~	~~BARNETT CENTER~~
~~4501 TAMIAMI TRAIL NORTH, STE. 216~~	~~4501 TAMIAMI TRAIL NORTH, STE. 216~~
NAPLES FL ~~33940~~	NAPLES FL ~~33940~~

3. Date Formed or Registered: 02/17/1984

3a. Date of Last Report: 12/28/1995

4. State or Country of Formation: FL

5a. Capital Contributions as Shown on record: $891.00

5b. Amount of Capital Contributions in FLORIDA to date:

2. Mailing Address	2a. Principal Office Address
P. O. Box 1826	P. O. Box 1826
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Naples, FL	City & State: Naples, FL
Zip: 34106-1826 Country: USA	Zip: 34106-1826 Country: USA

6. FEI Number: 41-1529164 ☐ Applied For ☐ Not Applicable

7. Certificate of Status Desired ☒ $8.75 Additional Fee Required

8. Make check payable to: Dept. of State (See reverse side for fee information)

Z100002155607--4
04/25/97--01093--005
****165.00 ****165.00

9. Name and Address of Current Registered Agent

~~CARLSON, GARRETT G SR.~~
~~4501 TAMIAMI TRAIL NORTH, STE. 216~~
~~NAPLES FL 33940~~

10. If changed, new Registered Agent/Office

Name: James D. Vogel
Street Address (P.O. Box Number Is Not Acceptable): 3936 Tamiami Trail North
Suite, Apt. #, etc.: Suite B
City: Naples FL Zip Code: 34103

10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment) [signature] DATE 3/31/97

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

11. Name(s) of General Partner(s)	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration/ Document Number
GARRETT REAL ESTATE DEVELOPM	4501 TAMIAMI TRAIL N.	NAPLES FL 33940	F95000003503
SHELTER CANADIAN PROPERTIES	2600 EVERGREEN PLACE	WINNIPEG, MANITOBA, C	F95000001688

returned within acceptable timeframe
[initials] 4/24

CR2E003 (11/96)

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE [signature] DATE 3/26/97

Typed or Printed Name of General Partner Signing Form: GARRETT G. CARLSON, SR. Daytime Telephone Number: 941-262-3744