

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000006298

FILED
Apr 21, 2009
Secretary of State

Entity Name: SHADE TREE CUSTOM PRODUCTS, INC

Current Principal Place of Business:

134 BROOKSIDE DRIVE
CANTON, NC 28716

New Principal Place of Business:

Current Mailing Address:

134 BROOKSIDE DRIVE
CANTON, NC 28716

New Mailing Address:

FEI Number: 04-3599719

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THERIAULT, MARK E SR.
522 SW JEANNE AVENUE
PORT SAINT LUCIE, FL 34953 US

Name and Address of New Registered Agent:

THERIAULT, MARK E JR
18865 S.W. 95 AVE
CUTLER BAY, FL 33157 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: MARK E THERIAULT JR

04/21/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PS () Delete
Name: THERIAULT, MARK E SR.
Address: 134 BROOKSIDE DRIVE
City-St-Zip: CANTON, NC 28716

Title: V () Delete
Name: KEMPER, BARRY
Address: 2865 BATTLEGROUND ROAD
City-St-Zip: COWPENS, SC 29330

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S () Change (X) Addition
Name: THERIAULT, MARK E JR
Address: 18865 S.W. 95 AVE
City-St-Zip: CUTLER BAY FLA, 33

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: MARK E THERIAULT SR

PS

04/21/2009

Electronic Signature of Signing Officer or Director

Date