

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000006734

Entity Name: SHADE SYSTEMS, INC.

Current Principal Place of Business:

4150 S.W. 19 STREET
OCALA, FL 34474

Current Mailing Address:

4150 S.W. 19 STREET
OCALA, FL 34474

FEI Number: 42-1571783

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BAYMAN, ALAN A
SHADE SYSTEMS, INC.
4150 S.W. 19 STREET
OCALA, FL 34474 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	P	Title	VP
Name	BAYMAN, ALAN A	Name	BARBER, JAMES N
Address	4150 S.W. 19 STREET	Address	4150 S.W. 19 STREET
City-State-Zip:	OCALA FL 34474	City-State-Zip:	OCALA FL 34474

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: ALAN BAYMAN

P

03/17/2014

Electronic Signature of Signing Officer/Director Detail

Date