

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000074335

**Entity Name:** SHAFER CHARITABLE INVESTMENTS, LLC

**Current Principal Place of Business:**

62 WYNDWOOD ROAD  
WEST HARTFORD, CT 06107

**Current Mailing Address:**

62 WYNDWOOD ROAD  
WEST HARTFORD, CT 06107 US

**FEI Number:** 46-5596539

**Certificate of Status Desired:** No

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

CT CORPORATION  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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:** KRISTIN BOLDEN, ASSISTANT SECRETARY

04/27/2021

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGR	Title	AUTHORIZED REPRESENTATIVE
Name	SHAFER, MARC T	Name	BROWN, AMY
Address	62 WYNDWOOD ROAD	Address	255 E FIFTH ST STE 2400
City-State-Zip:	WEST HARTFORD CT 06107	City-State-Zip:	CINCINNATI OH 45202
Title	MANAGER	Title	MANAGER
Name	SHAFER, JOAN M	Name	VANDENBURGH, LISA SHAFER
Address	14-3475 GOVERNMENT BEACH ROAD	Address	100 POTOMAC STREET NW #250
City-State-Zip:	PAHOA HI 96778	City-State-Zip:	WASHINGTON DC 20007-3533

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** AMY BROWN

**AUTHORIZED REP**

04/27/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date