

2016 FOREIGN PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F14000000746

Entity Name: SHADE STRUCTURES, INC.**Current Principal Place of Business:**11515 VANSTORY DRIVE, SUITE 100
HUNTERSVILLE, NC 28078**Current Mailing Address:**11515 VANSTORY DRIVE, SUITE 100
HUNTERSVILLE, NC 28078**FEI Number:** 46-3899811**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name PRUSS, MIKE
Address 11515 VANSTORY DRIVE, SUITE 100
City-State-Zip: HUNTERSVILLE NC 28078

Title VP, CFO, SECRETARY
Name PRUSS, MIKE
Address 11515 VANSTORY DRIVE
SUITE 100
City-State-Zip: HUNTERSVILLE NC 28078

Title VP
Name SCHNEIDER, DAVID
Address 11515 VANSTORY DRIVE
SUITE 100
City-State-Zip: HUNTERSVILLE NC 28078

Title DIRECTOR, CEO
Name COPELAND, JOE
Address 11515 VANSTORY DRIVE
SUITE 100
City-State-Zip: HUNTERSVILLE NC 28078

Title FINANCE DIRECTOR
Name AUTEN, ADAM
Address 8505 CHANCELLOR ROW
City-State-Zip: DALLAS TX 75247

Title PRESIDENT
Name SAUNDERS, JOHN
Address 11515 VANSTORY DRIVE
SUITE 100
City-State-Zip: HUNTERSVILLE NC 28078

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: MIKE PRUSS**SECRETARY****10/21/2016**

Electronic Signature of Signing Officer/Director Detail

Date