

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000006975

FILED
May 01, 2007
Secretary of State

Entity Name: THE SHIELD FOUNDATION, INC

Current Principal Place of Business:

1440 BLOOMINGDALE AVE
VALRICO, FL 33594 US

New Principal Place of Business:

Current Mailing Address:

1440 BLOOMINGDALE AVE
VALRICO, FL 33594 US

New Mailing Address:

FEI Number: 20-0349064 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

GRAVES, MARSHA
6507 N. FIVE ACRE RD.
PLANT CITY, FL 33565 US

Name and Address of New Registered Agent:

COMER, KATHRYN P
3010 OAKMONT DRIVE
CLEARWATER, FL 33761 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: KATHRYN P. COMER

05/01/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: SHIELDS, RUSTY
Address: PO BOX 355
City-St-Zip: GRANITE FALLS, NC 28630

Title: D () Delete
Name: BLANCHAT, TIMOTHY J
Address: 37 STILLWATER LANE
City-St-Zip: HICKORY, NC 28601

Title: D () Delete
Name: TOMLINSON, CARMELA
Address: 3739 HICKORY BLVD.
City-St-Zip: HUDSON, NC 28638

Title: ST () Delete
Name: STONE, ZECHARIAH P
Address: 2222 9TH AVE NE
City-St-Zip: HICKORY, NC 28601

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ZECHARIAH P. STONE

ST

05/01/2007

Electronic Signature of Signing Officer or Director

Date