

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000002769

FILED  
Apr 02, 2010  
Secretary of State

Entity Name: SHELTER PRODUCTS, INC.

## Current Principal Place of Business:

1490 SE GIDEON ST SUITE 100  
PORTLAND, OR 97202

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 42100  
PORTLAND, OR 97242

## New Mailing Address:

FEI Number: 91-1827267

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

## Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PRES  
Name: BEECHLER, GEORGE J PRES  
Address: 1490 SE GIDEON  
City-St-Zip: PORTLAND, OR 97202

Title: VP  
Name: WILSON, AARON VP  
Address: 1490 SE GIDEON  
City-St-Zip: PORTLAND, OR 97202

Title: CFO  
Name: HUTTON, KURT R CFO  
Address: 1490 SE GIDEON  
City-St-Zip: PORTLAND, OR 97202

Title: DIR  
Name: AUSTIN, JOHN T DIR  
Address: 1490 SE GIDEON  
City-St-Zip: PORTLAND, OR 97202

Title: DIR  
Name: SMITH, SIDNEY DIR  
Address: 1490 SE GIDEON  
City-St-Zip: PORTLAND, OR 97202

Title: DIR  
Name: ROSENFELD, WILL DIR  
Address: 1490 SE GIDEON  
City-St-Zip: PORTLAND, OR 97202

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: AARON WILSON

VP

04/02/2010

Electronic Signature of Signing Officer or Director

Date