

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000005061

FILED
Apr 17, 2009
Secretary of State

Entity Name: SHELTER CORPORATION

Current Principal Place of Business:

1600 HOPKINS CROSSROAD
MINNETONKA, MN 55305

New Principal Place of Business:

1600 HOPKINS CROSSROAD
MINNETONKA, MN 55305 US

Current Mailing Address:

1600 HOPKINS CROSSROAD
MINNETONKA, MN 55305

New Mailing Address:

1600 HOPKINS CROSSROAD
MINNETONKA, MN 55305 US

FEI Number: 41-1735738

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VOGEL, JAMES D
3936 TAMIAMI TRIAL NORTH
SUITE B
NAPLES, FL 34103 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: P () Delete
Name: SCHELL, LYNN C
Address: 1600 HOPKINS CROSSROAD
City-St-Zip: MINNETONKA, MN 55305

Title: VP () Delete
Name: CARLSON, GARRETT JR
Address: 1600 HOPKINS CROSSROAD
City-St-Zip: MINNETONKA, MN 55305

Title: T () Delete
Name: HENDRICKS, SHANNON
Address: 1600 HOPKINS CROSSROAD
City-St-Zip: MINNETONKA, MN 55305

Title: VP () Delete
Name: JESNEN, JAY
Address: 1600 HOPKINS CROSSROAD
City-St-Zip: MINNETONKA, MN 55305

Title: S (X) Delete
Name: BENNETT, FRANK
Address: 1600 HOPKINS CROSSROAD
City-St-Zip: MINNETONKA, MN 55305

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SCHELL, LYNN C
Address: 1600 HOPKINS CROSSROAD
City-St-Zip: MINNETONKA, MN 55305 US

Title: VP (X) Change () Addition
Name: CARLSON, GARRETT JR
Address: 1600 HOPKINS CROSSROAD
City-St-Zip: MINNETONKA, MN 55305 US

Title: VP (X) Change () Addition
Name: JENSEN, JAY
Address: 1600 HOPKINS CROSSROAD
City-St-Zip: MINNETONKA, MN 55305 US

Title: DIR (X) Change () Addition
Name: DIDIER, KYLE
Address: 1600 HOPKINS CROSSROAD
City-St-Zip: MINNETONKA, MN 55305 US

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

SIGNATURE: LYNN CARLSON SCHELL

P

04/17/2009

Electronic Signature of Signing Officer or Director

Date