## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F96000001750

Entity Name: SHELTER SOLUTIONS, INC.

FILED Jan 04, 2010 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2040 HWY A1A 2020 HWY A1A

# 203 # 107

INDIAN HARBOUR BEACH, FL 32937 US INDIAN HARBOUR BEACH, FL 32937 US

Current Mailing Address: New Mailing Address:

2040 HWY A1A 2020 HWY A1A

# 203 # 107

INDIAN HARBOUR BEACH, FL 32937 US INDIAN HARBOUR BEACH, FL 32937 US

FEI Number: 58-1913524 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

HERREN, JOSEPH S PRES.

2040 HWY A1A

HERREN, JOSEPH S PRES.

2020 HWY A1A

2040 HWY A1A 2020 HW # 203 # 107

INDIAN HARBOUR BEACH, FL 32937 US INDIAN HARBOUR BEACH, FL 32937 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: JOSEPH S HERREN 01/04/2010

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: DP

Name: HERREN, JOSEPH S SR Address: 1941 HWY A1A # 403

City-St-Zip: INDIAN HARBOUR BEACH, FL 32937 US

Title: DVP

Name: HERREN, JOSEPH S JR

Address: 1251 POWDER SPRINGS ROAD, #918

City-St-Zip: MARIETTA, GA 30064 US

Title: D

Name: MCMANIOUS, DORI A Address: 5873 TRELLIS COURT

City-St-Zip: POWDER SPRINGS, GA 30127 US

Title: DTS

Name: KALEMBER, MICHAEL A Address: 2020 HWY A1A # 107

City-St-Zip: INDIAN HARBOUR BEACH, FL 32937 US

Title: D

 Name:
 STURGEON, MOLLY D

 Address:
 2132 ALEXANDRIA DRIVE

 City-St-Zip:
 LEXINGTON, KY 40504 US

Title: DAS

Name: HERREN, NICOLE G
Address: 2252 ASQUITH AVE
City-St-Zip: MARIETTA, GA 30008 US

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

SIGNATURE: JOSEPH S. HERREN DP 01/04/2010