

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J18284

FILED  
Apr 16, 2007  
Secretary of State

Entity Name: C & W SHIELDS, INCORPORATED

## Current Principal Place of Business:

% WILLIAM SHIELDS  
4631 WENHART RD  
LAKE WORTH, FL 33463

## New Principal Place of Business:

922 DUCK ROAD  
BRASELTON, GA 30517 US

## Current Mailing Address:

% WILLIAM SHIELDS  
4631 WENHART RD  
LAKE WORTH, FL 33463

## New Mailing Address:

C&W SHIELDS, INC.  
922 DUCK ROAD  
BRASELTON, GA 30517 US

FEI Number: 59-2677310

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SHIELDS, WILLIAM  
4631 WENHART RD  
LAKE WORTH, FL 33463 US

## Name and Address of New Registered Agent:

ERSKINE, MARY C MS.  
238 CONCHA DRIVE  
SEBASTIAN, FL 32958-652 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: MARY ERSKINE

04/16/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: SHIELDS, CAROL,  
Address: 4631 WENHART RD  
City-St-Zip: LAKE WORTH, FL

Title: D ( ) Delete  
Name: SHIELDS, WILLIAM,  
Address: 4631 WENHART RD  
City-St-Zip: LAKE WORTH, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: SHIELDS, CAROL W  
Address: 922 DUCK ROAD  
City-St-Zip: BRASELTON, GA 30517 US

Title: D (X) Change ( ) Addition  
Name: SHIELDS, WILLIAM F  
Address: 922 DUCK ROAD  
City-St-Zip: BRASELTON, GA 30517 US

I hereby certify that the information supplied with this filing does not qualify for the 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: CAROL SHIELDS

DP

04/16/2007

Electronic Signature of Signing Officer or Director

Date