2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
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Secretary of State

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Entity Name: IAM SHELTER, INC.

Current Principal Place of Business:

5086 GOLFVIEW COURT
SUITE 1612
DELRAY BEACH, FL 33484

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 88
WILKESBORO, NC 28697

New Mailing Address:

FEI Number: 20-3502381 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CARTER, JILL M
5086 GOLF VIEW COURT
SUITE 1612
DELRAY BEACH, FL 33484 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

OFFICERS AND DIRECTORS:

Title: PSD
Name: CARTER, JAMES H
Address: 5086 GOLFVIEW COURT
City-St-Zip: DELRAY BEACH, FL 33484

Title: VTD
Name: CARTER, JILL M
Address: 5086 GOLFVIEW COURT
City-St-Zip: DELRAY BEACH, FL 33484

Title: D
Name: BARNWELL, JAMES
Address: 596 MICAH'S WAY
City-St-Zip: MORAVIAN FALLS, NC 28654

Title: D
Name: BARNWELL, DONNA
Address: 596 MICAH'S WAY
City-St-Zip: MORAVIAN FALLS, NC 28654

Title: D
Name: MORRIS, DOUGLAS
Address: 129 FAIRVIEW LANE
City-St-Zip: WILKESBORO, NC 28697

Title: D
Name: CARTER, JAMES C
Address: 4309 POPPLETON AVENUE
City-St-Zip: OMAHA, NE 68105

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: JILL M. CARTER VTD 03/24/2011

Electronic Signature of Signing Officer or Director — Date