2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 19, 2006
Secretary of State

DOCUMENT# N94000003763

Entity Name: SHELTER I INC.

Current Principal Place of Business:

189 N.E. 26TH STREET
MIAMI, FL 33137

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 160-158
ALTAMONTE SPRINGS, FL 32716 US

New Mailing Address:

FEI Number: 65-0525113 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

LEMIEUX, JOHN E
510 DOUGLAS AVE, #1025
ALTAMONTE SPRINGS, FL 32714 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: PD ( ) Delete
Name: LEMIEUX, JOHN E
Address: 189 N.E. 26TH STREET
City-St-Zip: MIAMI, FL 33137

Title: D ( ) Delete
Name: BARNARD, KUPET
Address: 189 NE 26 ST.
City-St-Zip: MIAMI, FL 33137

Title: D ( ) Delete
Name: SAYLOR, CRSSIMAN
Address: 189 NE 26 ST.
City-St-Zip: MIAMI, FL 33137

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: LEMIEUX, JOHN E
Address: 510 DOUGLAS AVE STE 1025
City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: GAYLOR, CRISSMAN
Address: 189 NE 26 ST.
City-St-Zip: MIAMI, FL 33137

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

SIGNATURE: JOHN E LEMIEUX PD 06/19/2006

Electronic Signature of Signing Officer or Director — Date