

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000119988

FILED
May 01, 2008
Secretary of State

Entity Name: EXECUTIVE SHELTER CORPORATION

Current Principal Place of Business:

105 W. WISCONSIN AVENUE
#209
DELAND, FL 32720

New Principal Place of Business:

Current Mailing Address:

105 W. WISCONSIN AVENUE
#209
DELAND, FL 32720

New Mailing Address:

FEI Number: 80-0021975

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WATERS, DENNIS
105 W. WISCONSIN AVENUE
#209
DELAND, FL 32720 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WATERS, DENNIS
Address: 3330 ENGLISH BRICK TRAIL
City-St-Zip: DELAND, FL 32724

Title: VP () Delete
Name: WATERS, GAIL
Address: 3330 ENGLISH BRICK TRAIL
City-St-Zip: DELAND, FL 32724

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: DENNIS WATERS

P

05/01/2008

Electronic Signature of Signing Officer or Director

Date