

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000079706

**FILED**  
**Mar 16, 2011**  
**Secretary of State**

**Entity Name:** SHIELDS ASPHALT COATING, INC.

**Current Principal Place of Business:**

780 S. SUNCOAST BLVD.  
HOMOSASSA, FL 34448 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 3617  
HOMOSASSA, FL 34447 US

**New Mailing Address:**

**FEI Number:** 86-1173080

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SHIELDS, KEVIN E  
780 S. SUNCOAST BLVD.  
HOMOSASSA, FL 34448 US

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

SHIELDS, CATHARINE J  
780 S. SUNCOAST BLVD.  
HOMOSASSA, FL 34448 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:** CATHARINE SHIELDS

03/16/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** SHIELDS, CATHARINE J  
**Address:** PO BOX 3617  
**City-St-Zip:** HOMOSASSA SPRINGS, FL 34447

**Title:** VP  
**Name:** SHIELDS, KEVIN E  
**Address:** PO BOX 3617  
**City-St-Zip:** HOMOSASSA SPRINGS, FL 34447

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

**SIGNATURE:** CATHARINE SHIELDS

P

03/16/2011

Electronic Signature of Signing Officer or Director

Date