2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 14, 2009
Secretary of State

DOCUMENT# P97000053545

Entity Name: SHIELD, INC.

Current Principal Place of Business:

1215 SIMONTON ST.
KEY WEST, FL 33040

New Principal Place of Business:

920 VIRGINIA STREET
KEY WEST, FL 33040

Current Mailing Address:

1215 SIMONTON ST.
KEY WEST, FL 33040

New Mailing Address:

920 VIRGINIA STREET
KEY WEST, FL 33040

FEI Number: 65-0776592 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SHIELD, DAVID M
1215 SIMONTON ST.
KEY WEST, FL 33040 US

Name and Address of New Registered Agent:

SHIELD, DAVID M
920 VIRGINIA STREET
KEY WEST, FL 33040 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: DAVID M SHIELD 01/14/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: SHIELD, DAVID M
Address: 1215 SIMONTON ST.
City-St-Zip: KEY WEST, FL 33040

Title: D ( ) Delete
Name: SHIELD, LINDA
Address: 1215 SIMONTON ST.
City-St-Zip: KEY WEST, FL 33040

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: SHIELD, DAVID M
Address: 920 VIRGINIA STREET
City-St-Zip: KEY WEST, FL 33040

Title: D (X) Change ( ) Addition
Name: SHIELD, LINDA
Address: 920 VIRGINIA STREET
City-St-Zip: KEY WEST, FL 33040

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: DAVID M SHIELD OFFI 01/14/2009
Electronic Signature of Signing Officer or Director Date