

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S82155 (0)

1. Corporation Name

UNIVERSAL SHELTER CORPORATION



Principal Place of Business

1061 RIVER REACH DRIVE
SUITE 201
NAPLES FL 33942

Mailing Address

1061 RIVER REACH DRIVE
SUITE 201
NAPLES FL 33942

3. Date Incorporated or Qualified
09/23/1991

3a. Date of Last Report
01/26/1995

2. Principal Place of Business

21 621-45th STREET

Suite, Apt. #, etc.

22 621-45th STREET

City & State

23 SARASOTA FLA

Zip

24 34234

Country

25 SARASOTA

2a. Mailing Address

26 3310 W. Hillsboro Blvd.

Suite, Apt. #, etc.

27 MCCLAIN FINANCIAL

City & State

28 DEERFIELD BEACH

Zip

29 33442

Country

30 BROWARD

Country

30 BROWARD

4. FEI Number

65-0287353

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be

Trust Fund Contribution

☐

Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MCEWEN, JOHN

1061 RIVER REACH DR. #201

NAPLES FL 33942

621-45th STREET
SARASOTA, FLA.
34234

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME P
STREET ADDRESS MCEWEN, JOHN
CITY-ST-ZIP 1061 RIVER REACH DRIVE, #201
NAPLES FL

1.1 TITLE PRESIDENT ☒ Change ☐ Addition
1.2 NAME MCEWEN, JOHN
1.3 STREET ADDRESS 621-45th STREET
1.4 CITY-ST-ZIP SARASOTA, FLA 34234

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this Annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 or changed for on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOHN MCEWEN

4/27/96 1-800-577-5529

Date

Daytime Phone 5382

CR2E034 (12/95)