

2017 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N1600009215

Entity Name: SHELTER ME CITRUS INC

Current Principal Place of Business:

5075 S. SHORELINE DR.
FLORAL CITY, FL 34436

Current Mailing Address:

P. O. BOX 1111
INVERNESS, FL 34451 US

FEI Number: 81-3630387

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SCHMID, DONNA R
5075 S. SHORELINE DR.
FLORAL CITY, FL 34436 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: DONNA R SCHMID

10/02/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name SCHMID, DONNA
Address 5075 S. SHORELINE DR.
City-State-Zip: FLORAL CITY FL 34436

Title VP
Name ESTY, KAREN
Address 2409 WILSON ST.
City-State-Zip: INVERNESS FL 34453

Title S/T
Name RESSLER, DEBBIE
Address 9373 E. RIVERMOON CT.
City-State-Zip: INVERNESS FL 34453

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

SIGNATURE: DONNA SCHMID

PRESIDENT

10/02/2017

Electronic Signature of Signing Officer/Director Detail

Date