

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F02427

**Entity Name:** SHIELD PROPERTIES, INC.

**Current Principal Place of Business:**

C/O WILLIAM L. AGRICOLA  
914 ATLANTIC AVE., SUITE 2-A  
FERNANDINA BEACH, FL 32034

**Current Mailing Address:**

C/O WILLIAM L. AGRICOLA  
914 ATLANTIC AVE., SUITE 2-A  
FERNANDINA BEACH, FL 32034

**FEI Number:** 59-2031325

**Certificate of Status Desired:** No

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

AGRICOLA, WILLIAM L.  
914 ATLANTIC AVE.  
SUITE 2-A  
FERNANDINA BEACH, FL 32034 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title PD  
Name AGRICOLA, WILLIAM L.  
Address 914 ATLANTIC AVE #2-A  
City-State-Zip: FERNANDINA BEACH FL 32034

Title ST  
Name AGRICOLA,BELINDA S.  
Address 914 ATLANTIC AVE #2-A  
City-State-Zip: FERNANDINA BEACH FL 32034

*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:** WILLIAM L AGRICOLA

**PRESIDENT**

**02/02/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date