# 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: MELISSA WESTMORELAND

Electronic Signature of Signing Officer/Director Detail

# 2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

### DOCUMENT# P09000073020

# Entity Name: INTERIOR SHOWCASE OF GAINESVILLE INC

# **Current Principal Place of Business:**

3624 NW 97TH BLVD GAINESVILLE. FL 32606

## **Current Mailing Address:**

4903 NW 78TH RD GAINESVILLE, FL 32653 US

# FEI Number: 27-0845697

# Name and Address of Current Registered Agent:

WESTMORELAND, MELISSA A 4903 NW 78TH RD GAINESVILLE, FL 32653 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

### **Officer/Director Detail :**

Title	PD	Title	VPD
Name	WESTMORELAND, MELISSA A	Name	WESTMORELAND, WADE K
Address	4903 NW 78TH RD	Address	4903 NW 78TH RD
City-State-Zip:	GAINESVILLE FL 32653	City-State-Zip:	GAINESVILLE FL 32653

Certificate of Status Desired: No

02/15/2024 Date

# FILED Feb 15, 2024 Secretary of State 1746113811CC

Date

PRESIDENT