

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 686390

FILED  
Jan 14, 2010  
Secretary of State

Entity Name: ANTIQUE CONNECTION, INC.

**Current Principal Place of Business:**

3945 ORTEGA BLVD.  
C/O ELIZABETH ROSS LOVETT  
JACKSONVILLE, FL 32210

**New Principal Place of Business:**

**Current Mailing Address:**

3945 ORTEGA BLVD.  
C/O ELIZABETH ROSS LOVETT  
JACKSONVILLE, FL 32210

**New Mailing Address:**

FEI Number: 59-0983676      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

LOVETT, ELIZABETH ROSS  
3945 ORTEGA BLVD.  
JACKSONVILLE, FL 32210      US

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

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: LOVETT, ELIZABETH R.  
Address: 3945 ORTEGA BLVD.  
City-St-Zip: JACKSONVILLE, FL 32210 US

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: ELIZABETH R. LOVETT

PD

01/14/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date