**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## 1999 DOCUMENT # F94000004642

JAN HORTON ART & INTERIORS LTD., INC.

		•								
Principal Place of Business Mailing Address							DISAN ILLA IBILI AIAN BENI ABIN AB	111 96111 80111 81218 EIII		
1209A 3RD ST. S.		1209A 3RD ST. S.								
NAPLES FL 33940		NAPLES FL 33940				DO NOT WRITE IN THIS SPACE				
						3 Date In	corporated or Qualifed		<del></del>	
						08/22	•			
2. Principal P	lace of Business		2a. Mailing Address			4. FEI Nur		A	pp ied For	
21	idee of Basiness		26			11-26	39376		lot Applicable	
Suite, Apt.	#. etc.		Suite, Apt. #, etc.					\$8.75	Additional	
22		27		5. Certifon	te of Status Desired	Fee F	Recuired			
City & State			City & State			6. Electio Campaign Financing		\$5.00	\$5.00 May Be	
23		_	28			Trust F	and Contribution	Added	to Fees	
Zip	Coun	iry	Zip	Country	,	8. This co	poration owes the current			
24	25		29	30			al Property Tax.	Yes	<b>X</b> ]No	
	9. Name and Add	ess of Current	Registered Agent		r	10. Name a	and Address of New Regi	stered Agent		
COD	DODATION INCODE	IATION CEDUIC	CEO IMO	81	Name					
CORPORATION INFORMATION SERV 1201 HAYS ST.			JEO, INC.	82	Street	Address (P.O. Box	Number is Not Acceptable)	-		
		•								
IALL	AHASSEE FL 3230	ı		83						
				84	City			85 Zip	Code	
			and 607.1508, Florida Stat		, í			FL		
agent. a	m familiar with, and ac	cept the obligati:	Florida. Such change was ons of, Section 607.0505, F	iorida Statutes	i.	equired when reinstating)		DATE		
12.	-9,,,,,,	OFFICERS AND		13.		ADDITIC	NS/CHANGES TO OFFICE	ERS AND DIRECT	OFS IN 12	
TITLE	P		☐ DELETE	1.1 TITLE				Change	Addition	
NAME	SOWARBY, JAN H	1		1.2 NAME						
STREET ADDRESS	2 QUINCE ST			1.3 STREE	T ADDRESS	513 BAY	VILLA LANE			
CITY-ST-ZIP	NANTUCKET MA			1.4 CITY-S	T-ZIP	NAPLES.	FL 34108			
TITLE	ST		☐ DELETE	2.1 TITLE		_		<b>X</b> Change	Addition	
NAME	SOWARBY, JOHN	L		22 NAME						
STREET ADDRESS	2 QUINCE ST			2.3 STREE	TADDRESS	513 BAY	VILLA LANE			
CITY-ST-ZIP	NANTUCKET MA			2, 4 CITY-	ST-ZIP	NAPLES,	FL 34108			
TITLE			☐ DELETE	31 TITLE				Change	Addition	
NAME				32 NAME						
STREET ADDRE S	<del> ~</del>	<del>-</del>		3.3 STREE	TADDRESS					
CITY-ST-ZIP				3.4. CITY-	ST-ZIP					
TITLE			☐ DELETE	4.1 TITLE				Change	e	
NAME				4. 2 NAME						
STREET ADDRESS				4.3 STREE	TADDRESS					
CITY-ST-ZIP				4.4 CITY-S	T-ZIP					
TITLE			☐ DELETE	5.1 TITLE				☐ Change	e Addition	
NAME				5.2 NAME						
STREET ADDRESS					TADDRESS					
CITY-ST-ZIP				5.4 CITY-S	ST-ZIP					
TITLE			☐ DELETE	6.1 TITLE				Change	Addition	
NAME	1			6.2 NAME						

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 neceiver 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 if changed, or on an attachment with an address, with all other like empowered.

FILED Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90146 030 \*\*\*150.00