

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000000087

FILED
Jan 14, 2005
Secretary of State

Entity Name: AMELIA INTERIOR DESIGN, INC.

Current Principal Place of Business:

503-C CENTRE ST
AMELIA ISLAND, FL 32034 US

New Principal Place of Business:

Current Mailing Address:

503-C CENTRE ST
AMELIA ISLAND, FL 32034 US

New Mailing Address:

FEI Number: 34-1605327 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHOLZ, RITA
503C CENTRE STREET
AMELIA ISLAND, FL 32034 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: PDC () Delete
Name: SCHOLZ, RITA
Address: 503 C CENTRE STREET
City-St-Zip: AMELIA ISLAND, FL 32034

Title: V (X) Delete
Name: DEEHAN, NANCY
Address: 503C CENTRE STREET
City-St-Zip: AMELIA ISLAND, FL 32034

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: RITA SCHOLZ

_____ Electronic Signature of Signing Officer or Director

P

01/14/2005

_____ Date