

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G18489

FILED  
Apr 26, 2006  
Secretary of State

Entity Name: ANTIQUES & INTERIORS, INC.

## Current Principal Place of Business:

2509 ORLEANS AVE SOUTH  
LAKELAND, FL 33803

## New Principal Place of Business:

8164 RESIDENCE COURT  
AMELIA ISLAND, FL 32034

## Current Mailing Address:

2509 ORLEANS AVE SOUTH  
LAKELAND, FL 33803

## New Mailing Address:

8164 RESIDENCE COURT  
AMELIA ISLAND, FL 32038

FEI Number: 59-2275696

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WEBB, JUDY H.  
2404 HOLLINGSWORTH HILL  
LAKELAND, FL 33803 US

## Name and Address of New Registered Agent:

WEBB, JUDY H.  
8164 RESIDENCE COURT  
AMELIA ISLAND, 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:

04/26/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: WEBB, JUDY H.,  
Address: 2404 HOLLINGSWORTH HILL  
City-St-Zip: LAKELAND, FL

Title: VPST ( ) Delete  
Name: WEBB, W. CAREY,  
Address: 2404 HOLLINGSWORTH HILL  
City-St-Zip: LAKELAND, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: WEBB, JUDY H.,  
Address: 8164 RESIDENCE COURT  
City-St-Zip: AMELIA ISLAND, FL 32034

Title: VPST (X) Change ( ) Addition  
Name: WEBB, W. CAREY,  
Address: 8164 RESIDENCE COURT  
City-St-Zip: AMELIA ISLAND, FL 32034

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: W CAREY WEBB

VPST

04/26/2006

Electronic Signature of Signing Officer or Director

Date