

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G58941

FILED
Jan 04, 2008
Secretary of State

Entity Name: LOST TREE INTERIORS INC.

Current Principal Place of Business:

C/O SALLY W GRIEB
11437 OLD HARBOUR RD
N. PALM BEACH, FL 33408 US

New Principal Place of Business:

Current Mailing Address:

C/O SALLY W GRIEB
11437 OLD HARBOUR RD
N. PALM BEACH, FL 33408 US

New Mailing Address:

FEI Number: 59-2343845

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRIEB, SALLY W.
11437 OLD HARBOUR RD
N. PALM BEACH, FL 33408 US

Name and Address of New Registered Agent:

GRIEB, SALLY W
11437 OLD HARBOUR RD
N. PALM BEACH, FL 33408 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: SALLY W. GRIEB

01/04/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: GRIEB, SALLY W,
Address: 11437 OLD HARBOUR RD
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: VP () Delete
Name: ERDMANN, LISA ECCLES, TONE
Address: 275 BARCELONA RD
City-St-Zip: WEST PALM BEACH, FL 33401

Title: T () Delete
Name: MENDELSON, WENDY
Address: 1929 PORTAGE LANDING NORTH
City-St-Zip: NORTH PALM BEACH, FL 33408

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: GRIEB, SALLY W
Address: 11437 OLD HARBOUR RD
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: VP (X) Change () Addition
Name: ERDMANN, LISA E
Address: 275 BARCELONA RD
City-St-Zip: WEST PALM BEACH, FL 33401

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

I hereby certify that the information supplied with this filing does not qualify 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: SALLY W. GRIEB

P

01/04/2008

Electronic Signature of Signing Officer or Director

Date