

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H01282

Entity Name: HOWELL INTERIORS, INC.

FILED  
Mar 25, 2008  
Secretary of State

## Current Principal Place of Business:

C/O TERESA L. ANDERSON  
160 PEACHTREE ST.  
COCOA, FL 32922 US

## Current Mailing Address:

C/O TERESA L. ANDERSON  
160 PEACHTREE ST.  
COCOA, FL 32922 US

## New Principal Place of Business:

C/O MELANIE LEBLANC  
2507 PALM AVENUE  
MIMS, FL 32754 US

## New Mailing Address:

C/O MELANIE LEBLANC  
2507 PALM AVENUE  
MIMS, FL 32754 US

FEI Number: 59-2405451

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ANDERSON, TERESA L  
160 PEACHTREE SREET  
COCOA, FL 32922 US

## Name and Address of New Registered Agent:

LEBLANC, MELANIE  
2507 PALM AVENUE  
MIMS, FL 32754 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: MELANIE LEBLANC

03/25/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: ANDERSON, TERESA L  
Address: 1535 EAST CROCKED LAKE DRIVE  
City-St-Zip: EUSTIS, FL 32726 US

Title: S ( ) Delete  
Name: LANE, ALLISON  
Address: 2520 SPRING HARBOR CIRCLE, APT. #12  
City-St-Zip: MOUNT DORA, FL 32757 US

Title: VPD (X) Delete  
Name: ANDERSON, ROBERT G  
Address: 1535 EAST CROCKED LAKE DRIVE  
City-St-Zip: EUSTIS, FL 32726 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: LEBLANC, MELANIE  
Address: 2507 PALM AVENUE  
City-St-Zip: MIMS, FL 32754 US

Title: VPD (X) Change ( ) Addition  
Name: LEBLANC, RICHARD  
Address: 2507 PALM AVENUE  
City-St-Zip: MIMS, FL 32754 US

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: MELANIE LEBLANC

PD

03/25/2008

Electronic Signature of Signing Officer or Director

Date