

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# H76094

FILED
Jun 05, 2009
Secretary of State**Entity Name:** NORRIS FURNITURE AND INTERIORS, INC.**Current Principal Place of Business:**14181 S TAMIAMI TRAIL
FT. MYERS, FL 33912**New Principal Place of Business:****Current Mailing Address:**14181 S TAMIAMI TRAIL
FT. MYERS, FL 33912**New Mailing Address:****FEI Number:** 59-2580891**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ULRICH, DOUGLAS
9370 MIDDLE OAK DRIVE
FORT MYERS, FL 33967 US**Name and Address of New Registered Agent:**FOWLER, DAVID K
1648 PERIWINKLE WAY, SUITE B
SANIBEL, FL 33957 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: DAVID K. FOWLER

06/05/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VD (X) Delete
Name: GRANT, RICK
Address: 1885 TWIN PONDS DR
City-St-Zip: HICKORY, NC 28602

Title: PD () Delete
Name: HENDRICKS, LARRY G
Address: 1094 14TH AVE DRIVE NW
City-St-Zip: HICKORY, NC 28601

Title: V (X) Delete
Name: INFIELD, JUDITH
Address: 4790 S. CLEVELAND AVE., #1106
City-St-Zip: FT. MYERS, FL 33907

Title: STD () Delete
Name: HENDRICKS, JANE
Address: 1094 14TH AVENUE DRIVE NW
City-St-Zip: HICKORY, NC 28601

Title: V (X) Delete
Name: DENNIS, MARGARETTE
Address: 5332 GRAND CYPRESS CIRCLE, #103
City-St-Zip: NAPLES, FL 34109

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PST (X) Change () Addition
Name: HENDRICKS, LARRY G
Address: 1094 14TH AVE DRIVE NW
City-St-Zip: HICKORY, NC 28601

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

Title: D (X) Change () Addition
Name: HENDRICKS, JANE
Address: 1094 14TH AVENUE DRIVE NW
City-St-Zip: HICKORY, NC 28601

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: LARRY G. HENDRICKS

P

06/05/2009

Electronic Signature of Signing Officer or Director

Date