## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H77722

Entity Name: HOWARDS INTERIORS, INC.

FILED Apr 18, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3100 SE FEDERAL HWY STUART, FL 34994

Current Mailing Address: New Mailing Address:

3100 SE FEDERAL HWY STUART, FL 34994

FEI Number: 59-2894943 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HOWARD, RICK T.

8294 S.E. SANCTUARY DRIVE
HOBE SOUND, FL 33455 US

HOWARD, RICK T
651 OKEECHOBEE BLVD
PH 103

WEST PALM BEACH, FL 33401 US

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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: RICK T. HOWARD 04/18/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ( ) Delete Title: PD (X) Change ( ) Addition

 Name:
 HOWARD, RICK T.,
 Name:
 HOWARD, RICK T.

 Address:
 8294 SE SANCTUARY DRIVE
 Address:
 651 OKEECHOBEE BLVD, PH 103

 City-St-Zip:
 HOBE SOUND, FL
 City-St-Zip:
 WEST PALM BEACH, FL 33401

Title: VST () Delete Title: VST (X) Change () Addition Name: HOWARD, NANCY W. Name: HOWARD, NANCY W

 Name:
 HOWARD, NANCY W.,
 Name:
 HOWARD, NANCY W

 Address:
 8294 SE SANCTUARY DRIVE
 Address:
 8294 SE SANCTUARY DRIVE

 City-St-Zip:
 HOBE SOUND, FL
 33455

Title: D () Delete Title: D (X) Change () Addition

 Name:
 HOWARD, NANCY W.,
 Name:
 HOWARD, NANCY W

 Address:
 8294 SE SANCTUARY DRIVE
 Address:
 8294 SE SANCTUARY DRIVE

 City-St-Zip:
 HOBE SOUND, FL
 City-St-Zip:
 HOBE SOUND, FL
 33455

Title: D () Delete Title: () Change () Addition

 Name:
 WALKER, SÚSAN C
 Name:

 Address:
 7038 SE SLEEPY HOLLOW LANE
 Address:

 City-St-Zip:
 STUART, FL 34997
 City-St-Zip:

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: SUSAN C. WALKER D 04/18/2006