

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H96062

FILED  
Apr 30, 2009  
Secretary of State

**Entity Name:** BACHMAN'S ANTIQUES, USED FURNITURE COLLECTIBLE'S, INC.

**Current Principal Place of Business:**

2360 E MOODY BLVD  
BUNNELL, FL 32110

**New Principal Place of Business:**

**Current Mailing Address:**

2360 E MOODY BLVD  
BUNNELL, FL 32110

**New Mailing Address:**

**FEI Number:** 59-2633800

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BACHMAN, WILLIAM D  
600 SHEARWOOD DR  
FLAGLER BEACH, FL 32136 US

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

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:**

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: BACHMAN, JOSEPH M.  
Address: 2628 SO. A1A  
City-St-Zip: FLAGLER BEACH, FL 32136 US

Title: P ( ) Delete  
Name: BACHMAN, WILLIAM D.  
Address: 2628 SO. A1A  
City-St-Zip: FLAGLER BEACH, FL 32136 US

Title: T ( ) Delete  
Name: BACHMAN, BEVERLY A.  
Address: 2628 SO. A1A  
City-St-Zip: FLAGLER BEACH, FL 32136 US

Title: VP ( ) Delete  
Name: BACHMAN, BRUCE R  
Address: 2628 SO A1A  
City-St-Zip: FLAGLER BCH, FL 32136 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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:** WILLIAM D BACHMAN

P

04/30/2009

Electronic Signature of Signing Officer or Director

Date