

**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT (AR) - DUE BY MAY 1, 2008**

**FILED**  
**May 14, 2008 8:00 am**  
**Secretary of State**

05-14-2008 90078 005 \*\*\*138.75

DOCUMENT # L03000041994

1. Entity Name

IMAGINE INTERIORS AND ANTIQUES, LLC



Principal Place of Business

168 EAST DOGWOOD  
MONTICELLO FL 32344  
US

Mailing Address

690 N JEFFERSON ST  
MONTICELLO FL 32344  
US

2. Principal Place of Business - No P.O. Box #

225 N. Jefferson St

Suite, Apt. #, etc.

3. Mailing Address

225 N. Jefferson St

Suite, Apt. #, etc.

City & State

Monticello FL

Zip  
32344

Country  
USA

City & State

Monticello FL

Zip  
32344

Country  
USA

4. FEI Number

20-0354398

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

6. Name and Address of Current Registered Agent

SCHALL  
BECKINGHAM, CORIN  
690 N JEFFERSON ST  
MONTICELLO FL 32344

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when remaining)

DATE

**FILE NOW!!! FEE IS \$138.75**

**After May 1, 2008, Fee Will Be \$538.75**

**Make Check Payable to Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

TITLE MGR  
NAME BECKINGHAM, CORIN  
STREET ADDRESS 690 N JEFFERSON ST  
CITY-ST-ZIP MONTICELLO FL 32344 ☐ Delete

TITLE MGR  
NAME SCHALL, DANIEL D  
STREET ADDRESS 3924 HEATHE DR  
CITY-ST-ZIP TALLAHASSEE FL 32309 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

10. ADDITIONS/CHANGES

TITLE MGR  
NAME Schall CORIN  
STREET ADDRESS 225 N. Jefferson St.  
CITY-ST-ZIP Monticello FL 32344 ☒ Change ☐ Addition

TITLE MGR  
NAME Schall, Daniel D  
STREET ADDRESS 690 N. Jefferson St.  
CITY-ST-ZIP Monticello FL 32344 ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Daniel D Schall Daniel D Schall  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

4/25/08 80-997-4408  
Date Daytime Phone #