

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L11677

FILED
Jan 08, 2008
Secretary of State

Entity Name: APPLGATE INTERIORS, INC.

Current Principal Place of Business:

2100 2ND AVE. N. #5
LAKE WORTH, FL 33461

New Principal Place of Business:

2100 2ND AVE. N. #1
LAKE WORTH, FL 33461

Current Mailing Address:

2100 2ND AVE. N. #5
LAKE WORTH, FL 33461

New Mailing Address:

2100 2ND AVE. N. #1
LAKE WORTH, FL 33461

FEI Number: 65-0136709

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DONOVAN, JAMES J CPA
3830 JOG ROAD
LAKE WORTH, FL 33467 US

Name and Address of New Registered Agent:

DONOVAN, JAMES J CPA
3046 S. CONGRESS AVE.
LAKE WORTH, FL 33461 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:

01/08/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: APPLGATE, CAROLE M.,
Address: 308 AKRON RD.
City-St-Zip: LAKE WORTH, FL 33467 US

Title: D () Delete
Name: APPLGATE, WILLIAM,
Address: 308 AKRON RD.
City-St-Zip: LAKE WORTH, FL 33467 US

Title: D () Delete
Name: APPLGATE, WILLIAM G, AINES
Address: 16553 77TH TRAIL N
City-St-Zip: PALM BEACH GARDENS, FL 33418 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:

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: CAROLE M. APPLGATE

MRS.

01/08/2008

Electronic Signature of Signing Officer or Director

Date