2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 03, 2008
Secretary of State

DOCUMENT# L31395

Entity Name: CONTEMPORARY INTERIORS, INC.

Current Principal Place of Business:

2626 NW 35TH STREET
OCALA, FL 344753342 US

New Principal Place of Business:

Current Mailing Address:

2626 NW 35TH STREET
OCALA, FL 344753342 US

New Mailing Address:

FEI Number: 59-2979654 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

ANDERSON, JAMES B
2626 NW 35 ST
OCALA, FL 34475 US

Name and Address of New Registered Agent:

ANDERSON, RYAN
2626 NW 35 ST
OCALA, FL 34475 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: RYAN ANDERSON 01/03/2008
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: SILK, DAVID L.,
Address: 8550 NW 136TH AVE RD
City-St-Zip: OCALA, FL

Title: VD ( ) Delete
Name: ANDERSON, RYAN W
Address: 3675 SE 38TH TERR
City-St-Zip: OCALA, FL 34471

Title: VD (X) Delete
Name: ANDERSON, JAMES B.,
Address: 2798 SE 41ST PL
City-St-Zip: OCALA, FL

Title: STD (X) Delete
Name: ANDERSON, JAMES B
Address: 2798 SE 41ST PL
City-St-Zip: OCALA, FL 34480

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: RYAN ANDERSON VP 01/03/2008
Electronic Signature of Signing Officer or Director Date