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Apr 07 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # M69096 (9)
1. Corporation Name
LYNN'S INTERIOR DESIGNS, INC.



Principal Place of Business
P. O. BOX 2306
CRYSTAL RIVER FL 32623

Mailing Address
P. O. BOX 2306
CRYSTAL RIVER FL 32623

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 <i>1600 W. Gulf to Lake Hwy</i> Suite, Apt. #, etc.		2a. Mailing Address 26 <i>same as above</i> Suite, Apt. #, etc.		3. Date Incorporated or Qualified <i>02/16/1988</i>	
22 City & State 23 <i>Crystal River, FL</i>		27 City & State		4. FET Number <i>NOT APPLICABLE</i>	
24 Zip <i>34429</i>		28 Country <i>USA</i>		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
25 <i>Citrus</i>		29		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
30		31		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent BEATTY, JUDITH LYNN 5711 W. PINE CIR. CRYSTAL RIVER FL 32623		10. Name and Address of New Registered Agent 81 Name <i>SAME</i> 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City <i>FL</i> 85 Zip Code	
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *Judith L. Beatty* DATE *4-3-98*
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<i>PVS BEATTY, JUDITH LYNN 5711 W. PINE CIRCLE CRYSTAL RIVER FL</i>	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP	<i>PVS Beatty, JUDITH LYNN 9391 MARQUETTE LANE CRYSTAL RIVER, FL 34429</i>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<i>T BEATTY, JUDITH LYNN 5711 W. PINE CIRCLE CRYSTAL RIVER FL</i>	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	<i>T JUDITH LYNN BEATTY 9391 MARQUETTE LANE CRYSTAL RIVER, FL 34429</i>
TITLE NAME STREET ADDRESS CITY - ST - ZIP		3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE: *Judith L. Beatty* DATE *4-3-98*
Signature typed or printed name of officer or director

CR2E034 (10/97)