

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Feb 23, 1999 8:00 am
Secretary of State

02-23-1999 90006 017 ***150.00

PROFIT
 CORPORATION
 ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # M69096

1. Corporation Name

~~LYNN'S INTERIOR DESIGNS, INC.~~

Lynn's Interiors, Inc.

Principal Place of Business
 7660 W GULF TO LAKE HWY
 CRYSTAL RIVER FL 34429
 US

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

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/16/1988

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Election Campaign Financing
 Trust Fund Contribution ☐

\$5.00 May Be
 Added to Fees

8. This corporation owes the current year Intangible
 Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 *7660 W. Gulf to Lake Hwy*

2a. Mailing Address

26 Suite, Apt. #, etc.

22 City & State

23 *Crystal River, FL*

27 City & State

28 City & State

24 *34429* 25 *USA*

29 Zip Country

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 *Beatty, Judith Lynn*
 82 Street Address (P.O. Box Number is Not Acceptable)
9391 Marquette Ln.
 83
 84 City *Crystal River* FL 85 Zip Code *34429*

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*

(NOTE: Registered Agent signature required when reinstating)

DATE

1/11/99

12. OFFICERS AND DIRECTORS

TITLE	PVS	<input type="checkbox"/> DELETE
NAME	BEATTY, JUDITH LYNN	
STREET ADDRESS	9391 MARQUETTE LN	
CITY-ST-ZIP	CRYSTAL RIVER FL 34429	
TITLE	T	<input type="checkbox"/> DELETE
NAME	BEATTY, JUDITH LYNN	
STREET ADDRESS	9391 MARQUETTE LN	
CITY-ST-ZIP	CRYSTAL RIVER FL 34429	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
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TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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, with all other like empowered.

SIGNATURE: *Judith L. Beatty*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/11/99 *352-795-6680*
 Date Daytime Phone #

CR2E034 (11/98)