## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N00000004558

FILED May 29, 2009 Secretary of State

Entity Name: INTERIOR DESIGN GUILD FOUNDATION, INC. **Current Principal Place of Business: New Principal Place of Business:** 714 HIBISCUS ST 741HIBISCUS ST BOCA RATON, FL 33486 BOCA RATON, FL 33486 **Current Mailing Address: New Mailing Address:** 741 HIBISCUS ST 714 HIBISCUS ST BOCA RATON, FL 33486 BOCA RATON, FL 33486 FEI Number: 65-1041959 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WIRTZ, MICHAEL WIRTZ, MICHAEL 714 HIBISCUS ST 741 HIBISCUS ST BOCA RATON, FL 33486 BOCA RATON, FL 33486 US 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: 05/29/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: ( ) Delete (X) Change ( ) Addition WIRTZ, MICHAEL WIRTZ, MICHAEL Name: Name: Address: 714 HIBISCUS ST Address: 741 HIBISCUS ST City-St-Zip: BOCA RATON, FL 33486 City-St-Zip: BOCA RATON, FL 33486 Title: VS () Delete Title: () Change () Addition Name: DUPONT, CHIP Name: Address: 1191 E NEWPORT CENT DR Address: City-St-Zip: DEERFIELD BEACH, FL 33442 City-St-Zip: Title: () Delete Title: () Change () Addition ALSCHULER, AL Name: Name: 2430 BRICKEL AVE, #104A Address: Address: City-St-Zip: MIAMI, FL 33129 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL WIRTZ PT 05/29/2009