

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002800

FILED  
Jun 24, 2008  
Secretary of State

Entity Name: ECLECTIC RESTORATION, INC.

## Current Principal Place of Business:

8220 CLEARY BLVD. #2216  
PLANTATION, FL 33324

## New Principal Place of Business:

7607 NW 40 STREET  
CORAL SPRINGS, FL 33065

## Current Mailing Address:

8220 CLEARY BLVD. #2216  
PLANTATION, FL 33324

## New Mailing Address:

7607 NW 40 STREET  
CORAL SPRINGS, FL 33065

FEI Number: 81-0646826      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:

WILSON, IVORY  
8220 CLEARY BLVD #2216  
PLANTATION, FL 3324      US

## Name and Address of New Registered Agent:

WILSON, IVORY  
7607 NW 40 STREET  
CORAL SPRINGS, FL 33065      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: \_\_\_\_\_

06/24/2008

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD      ( ) Delete  
Name: MATHIS, JOY R  
Address: 8220 CLEARY BLVD. #2216  
City-St-Zip: PLANTATION, FL 33324

Title: VD      ( ) Delete  
Name: MATHIS, NEIL  
Address: 8220 CLEARY BLV. #2216  
City-St-Zip: PLANTATION, FL 33324

Title: C      ( ) Delete  
Name: BYRD, ANTHONY  
Address: 8220 CLEARY BLV. #2216  
City-St-Zip: PLANTATION, FL 33324

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD      (X) Change ( ) Addition  
Name: MATHIS, JOY R  
Address: 7607 NW 40 STREET  
City-St-Zip: CORAL SPRINGS, FL 33065

Title: VD      (X) Change ( ) Addition  
Name: MATHIS, NEIL  
Address: 7607 NW 40 STREET  
City-St-Zip: CORAL SPRINGS, FL 33065

Title: C      (X) Change ( ) Addition  
Name: BYRD, ANTHONY  
Address: 7607 NW 40 STREET  
City-St-Zip: CORAL SPRINGS, FL 33065

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: JOY MATHIS

DIR

06/24/2008

Electronic Signature of Signing Officer or Director

Date