2002 UNIFORM BUSINESS REPORT (UBR) FILED May 28, 2002 8:00 am Secretary of State DOCUMENT # N9400002649 1. Entity Name ASSOCIATION OF LICENSED INTERIOR DESIGNERS, INC. 05-28-2002 91511 049 ****61.25 Principal Place of Business Mailing Address BAER'S FURNITURE BAER'S FURNITURE 1421 S FEDERAL HWY 1421 S FEDERAL HWY STUART FL 34994 STUART FL 34994 US 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number City & State City & State 65-0480144 \$8.75 Additional Country Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) PRINZ, BETH 1100 S FEDERAL HWY STUART FL 34994 Zip Code City FL 8. 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 DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 11. 10. ecketaky Delete TITLE TITLE NAME SPENCER, LOIS NAME

Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 Addition ☐ Change STREET ADDRESS STREET ADDRESS BOX #1163 CITY-ST-ZIP CITY-ST-ZIP PALM CITY FL 34991 ☐ Addition Delete TITLE TIŢĻE NAME Poag, angela DOWNS Blud. NAME STREET ADDRESS STREET ADDRESS 5050 SE FEDERAL HWY CITY-ST-ZIP CITY-ST-ZIP STUART FL 34997 Change Addition Delete TITLE TITLE NAME RALPH, BEVERLY NAME STREET ADDRESS 3784_SW_QUAIL MEADOW_TRAIL STREET ADDRES CITY-ST-ZIP CITY-ST-ZIP PALM CITY FL Change Addition Delete TITLE TITLE NAME GORAL, LYNN NAME STREET ADDRESS STREET ADDRESS 700 SE MICHAEL'S COURT CITY-ST-ZIF CITY-ST-ZIP STUART FL 34996 ☐ Change ☐ Addition ☐ Delete TITLE TITLE MORGAN, SUSAN M. NAME STREET ADDRESS STREET ADDRESS 4340 SE COMMERCE AVENUE CITY-ST-ZIP CITY-ST-ZIP STUART FL Addition Change Change TITLE ☐ Delete TITLE SPENCER ALLENSON, SUSAN NAME NAME STREET ADDRESS 2740 SW MARTIN DOWN BLVD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PALM CITY FL 34990

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(30). Plorida Statutes. I further certify that the information indicated on this report or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empor

Applied For

Not Applicable