## **№2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

## DOCUMENT # N95000000213



Feb 05, 2007 8:00 am Secretary of State

**FILED** 

Entity Name     INTERIOR DESIGN ASSOCIATIONS FOUNDATION, INC.									02-05-2007	90124 04	47 <b>****</b> 61	.25
Principal Place of Business  Mailing Address  DESIGNWORKS CREATIVE PARTNERSHIP  250 ROYAL COURT  DELRAY BEACH, FL 33444  Mailing Address  DESIGNWORKS CREATIVE  250 ROYAL COURT  DELRAY BEACH, FL 33444						rtnershi	IP .		BIB (BIB) 81111 88111 88111 8	: :	: ************************************	111 <b>0</b> 3 <b>e</b> 1 <b>703</b> ;
2. Principal Place of Business - No P.O. Box # 3. Ma				Mailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.				01252007	Chg-NP	CR2E0	37 (12/06)		
City & State			City & State			·	4. FEI Num 65-05	<sup>ber</sup> 61445		J	oplied For of Applicable	
Zip	Zip Country		Zip	Zip Cou		intry	ï	5. Certifical	te of Status Desired		\$8.75 Add	
	6. Name	and Address of Current	Registered	Agent				7. Name ar	nd Address of New	Registered	Agent	
HEFNER, STEVEN M %DESIGNWORKS CREATIVE PARTNERSHIP 250 ROYAL COURT DELRAY BEACH, FL 33444						Name Street Address (P.O. Box Number is Not Acceptable)						
DELKATE	SEACH, FI	. 33 <del>444</del>				City				Fl	Zip Cod	е
	named entity	y submits this statement for	the purpos	se of changing its r	registere	ed office or	register	ed agent, or b	oth, in the State of F		_	and accept
SIGNATURE .		or printed name of registered agent a	and title if applic	able. (NOTE:	: Registere	d Agent signatu	ure required	when reinstating)		DATE	<u> </u>	<u> </u>
Filing Fee is \$61.25 Due by May 1, 2007				9. Election Campaign Financing Trust Fund Contribution.								
	_							\$5.00 May Added to Fee	-		k payable t	
10.	_		RECTORS					Added to Fee	-	orida Depa	rtment of S	late
10.	_	lay 1, 2007	RECTORS		ontributi	on.	) PE :	Added to Fee	HANGES TO OFFICE	orida Depa ERS AND D	rtment of S	late
	Due by N	lay 1, 2007	RECTORS	Trust Fund Co	ontributi	on.	PE :	Added to Fee	HANGES TO OFFICE	orida Depa CERS AND D	rtment of S	tate
TITLE NAME STREET ADDRESS	Due by N CROSBY, 4480 BAY	OFFICERS AND DIF SUSETTE WILDER SHORE CIRCLE	RECTORS	Trust Fund Co	11. TITLE NAMI	On.	24H	Added to Fee	HANGES TO OFFICE	orida Depa CERS AND D F	IRECTORS IN Change	tate
TITLE NAME	Due by N CROSBY, 4480 BAY TALLAHA	OFFICERS AND DIF	RECTORS	Trust Fund Co	11. TITLE NAMI	E E ET ADDRESS -ST-2IP	Jac Jac	Added to Fee ADDITIONS/C DESTI NCE Y St. 7	HANGES TO OFFICE	orida Depa CERS AND D F	RECTORS IN Change	tate
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	DUE by NO CROSBY, 4480 BAY TALLAHA P HEFNER 250 ROYA	OFFICERS AND DIF SUSETTE WILDER SHORE CIRCLE SSEE, FL 32309	RECTORS	Trust Fund Co	11. TITLE NAMI STRE CITY TITLE NAMI STRE	E E E E ADDRESS	PE = JAN Jac Jac HE	Added to Fee ADDITIONS/C  INCE  St. 7  LSON  Direct  FUE R  ROYA	HANGES TO OFFICE  JOHN'S A  INC. FL  IOF, Stever  Court	ERS AND D	IRECTORS IN Change	tate
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Due by N CROSBY, 4480 BAY TALLAHA P HEFNER 250 ROYA DELRAY	OFFICERS AND DIF SUSETTE WILDER SHORE CIRCLE SSEE, FL 32309	RECTORS	Trust Fund Co	11. TITLE NAMM STRE CITY TITLE NAMM STRE CITY	E E ET ADDRESS E E E E E ADDRESS - ST-ZIP	PE = 3AN 300 300 NE	Added to Fee ADDITIONS/C  Treat  St.	HANGES TO OFFICE JOHN'S A JOHN	ERS AND D	IRECTORS IN Change Change	110 Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Due by N  CROSBY, 4480 BAY TALLAHA  P HEFNER 250 ROYA DELRAY PE BAO-GAR	OFFICERS AND DIF SUSETTE WILDER SHORE CIRCLE SSEE, FL 32309 W, STEVEN M L COURT BEACH, FL 33444	RECTORS	Trust Fund Co	11. TITLE NAMI STRE CITY TITLE NAMI STRE CITY TITLE NAMI NAMI STRE CITY	E E ET ADDRESS E E ET ADDRESS ST- ZIP	7E = 3AN 300 NE 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Added to Fee ADDITIONS/C  TO SHAPE  ASSON  A	HANGES TO OFFICE  JOHN'S A  INC. FL  STEVEN  COURT  STEVEN  COURT  BEACH.	ERS AND D	IRECTORS IN Change	110 ☑ Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 charged, or on an attachment with an address, with all other like empowered.

SIGNATURE: