

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004843

FILED
May 12, 2010
Secretary of State

Entity Name: ANN'S RESTORATION HOUSE, INC.

Current Principal Place of Business:

599 CAROLINA AVE.
FT. MYERS, FL 33905

New Principal Place of Business:

Current Mailing Address:

599 CAROLINA AVE.
FT. MYERS, FL 33905

New Mailing Address:

FEI Number: 65-0958295 **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:

CARDINALE, VITO
599 CAROLINA AVE.
FT. MYERS, FL 33905 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CACT
Name: CARDINALE, ANNMARIE
Address: 599 CAROLINA AVE.
City-St-Zip: FT. MYERS, FL 33905

Title: D
Name: BECKER, KARL
Address: 460 CAROLINA AVE.
City-St-Zip: FT. MYERS, FL 33905

Title: DOS
Name: ARMSTRONG, CAROL SEC
Address: 19364 CORAL TREE COURT
City-St-Zip: LEHIGH ACRES, FL 33936

Title: DOT
Name: PUCKETT, BARBARA
Address: 20231 STATE ROAD 31
City-St-Zip: N FORT MYERS, FL 33917

Title: D
Name: CONNEL, NICKIE
Address: 3593 EDGEWOOD AVENUE
City-St-Zip: FORT MYERS, FL 33916

Title: D
Name: LOPEZ-MENDEZ, FRANCIS
Address: 3790 RICHARD ROAD
City-St-Zip: N FT MYERS, FL 33903

I hereby 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 all other like empowered.

SIGNATURE: ANNMARIE CARDINALE

CACT

05/12/2010

Electronic Signature of Signing Officer or Director

Date