

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 02, 2005 8:00 am
Secretary of State

09-02-2005 90011 049 ***150.00

DOCUMENT # P00000083017					
1. Entity Name SILKS 'N THINGS, INC.					
Principal Place of Business 777-C HIGHWAY 27 CLERMONT, FL 34711			Mailing Address 777-C HIGHWAY 27 CLERMONT, FL 34711		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-3670365	
Zip		Country		Applied For Not Applicable	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent JORDAN, EDWARD P ESQ. 13543 EAST HIGHWAY 50 CLERMONT, FL 34711			7. Name and Address of New Registered Agent		
Name			A. Marie Howd		
Street Address (P.O. Box Number is Not Acceptable)			10565 Lake Hill Dr.		
City			CLERMONT		Zip Code FL 34711
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <i>A. Marie Howd</i>		A. Marie Howd		7-11-05	
Signature, typed or printed name of registered agent and title, if applicable.		(NOTE: Registered Agent signature required when reconstituting)		DATE	
FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D HOWD, A. MARIE <input type="checkbox"/> Delete 777-C HIGHWAY 27 CLERMONT, FL 34711		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 607, 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 empowered.					
SIGNATURE: <i>A. Marie Howd</i>		A. Marie Howd		7-11-05	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		352-394-6496	