2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 22, 2009
Secretary of State

DOCUMENT# P00000094787

Entity Name: TEAPOTS & TREASURES, INC.

Current Principal Place of Business:

9339 ALTERNATE A1A, LIVE OAK PLAZA
LAKE PARK, FL 33403

New Principal Place of Business:

Current Mailing Address:

9339 ALTERNATE A1A, LIVE OAK PLAZA
LAKE PARK, FL 33403

New Mailing Address:

FEI Number: 65-1083203 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MITCHELL, SUSAN F
10033 DAISY AVE.
PALM BCH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

O'DONNELL, BARBARA
13354 WHISPERING LAKES LANE
PALM BCH GARDENS, FL 33418 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: BARBARA O'DONNELL 06/22/2009
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: MITCHELL, SUSAN F
Address: 10033 DAISY AVE.
City-St-Zip: PALM BCH GARDENS, FL 33410

Title: D ( ) Delete
Name: O'DONNELL, BARB
Address: 13354 WHISPERING LAKES LANE
City-St-Zip: PALM BCH GARDENS, FL 33418

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: O'DONNELL, KEVIN
Address: 13354 WHISPERING LAKES LANE
City-St-Zip: PALM BCH GARDENS, FL 33418

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BARBARA O'DONNELL D 06/22/2009
Electronic Signature of Signing Officer or Director Date