

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 14, 2003 8:00 am
Secretary of State

04-14-2003 90049 008 ***150.00

DOCUMENT # P01000006599

1. Entity Name
CHRISTINE'S HOME ACCENTS, INC.



Principal Place of Business
**1272 OLD HWY 98 STE 601
DESTIN FL 32550**

Mailing Address
**1272 OLD HWY 98 STE 601
DESTIN FL 32550**

2. Principal Place of Business

4421 Commons Dr E #413
Suite, Apt. #, etc.

3. Mailing Address

4421 Commons Dr E #413
Suite, Apt. #, etc.

City & State
Destin, FL

City & State
Destin, FL

Zip
32541

Country

Zip
32541

Country

4. FEI Number **59-3694918**

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

HALL, DONALD J
1272 OLD HWY 98 STE 601
DESTIN FL 32550

7. Name and Address of New Registered Agent

Name
HALL, DONALD J
Street Address (P.O. Box Number is Not Acceptable)
181 KEL-WEN CIRCLE
City
DESTIN FL Zip Code
32541

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 *Donald J Hall*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4-11-03
DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **HALL, DONALD J**
STREET ADDRESS **1272 OLD HWY 98 STE 601**
CITY-ST-ZIP **DESTIN FL 32550**

TITLE **D** ☐ Delete
NAME **HALL, MARY C**
STREET ADDRESS **1272 OLD HWY 98 STE 601**
CITY-ST-ZIP **DESTIN FL 32550**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **181 KEL-WEN CIRCLE**
CITY-ST-ZIP **DESTIN, FL 32541**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **181 KEL-WEN CIRCLE**
CITY-ST-ZIP **DESTIN, FL 32541**

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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: SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Donald J Hall **4-11-03**
Date Daytime Phone #

CR2E034 (10/02)