2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 29, 2007
Secretary of State

DOCUMENT# P01000010720

Entity Name: AN AFFAIR TO REMEMBER, CORP.

Current Principal Place of Business:

2821 BROWARD CT.
OVIEDO, FL 32765

New Principal Place of Business:

3835 STONE PINE COURT
OVIEDO, FL 32766

Current Mailing Address:

2821 BROWARD CT.
OVIEDO, FL 32765

New Mailing Address:

3835 STONE PINE COURT
OVIEDO, FL 32766

FEI Number: 59-3703383 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TRIPP, JOANNE R
360 SMITH ST.
OVIEDO, FL 32765 US

Name and Address of New Registered Agent:

TRIPP, JOANNE R
3835 STONE PINE COURT
OVIEDO, FL 32766 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: JOANNE R. TRIPP 01/29/2007
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: TRIPP, JOANNE R
Address: 360 SMITH ST.
City-St-Zip: OVIEDO, FL 32765

Title: VP ( ) Delete
Name: ZRALLACK, BRANDI L
Address: 2821 BROWARD CT.
City-St-Zip: OVIEDO, FL 32765

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: TRIPP, JOANNE R
Address: 3835 STONE PINE COURT
City-St-Zip: OVIEDO, FL 32766

Title: VP (X) Change ( ) Addition
Name: ZRALLACK, BRANDI L
Address: 3835 STONE PINE COURT
City-St-Zip: OVIEDO, FL 32766

I hereby certify that the information supplied with this filing does not qualify for the 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: JOANNE R. TRIPP P 01/29/2007
Electronic Signature of Signing Officer or Director Date