

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000039404

FILED
Apr 15, 2009
Secretary of State

Entity Name: ALDERMAN INTERIOR DESIGN, INC.

Current Principal Place of Business:

11906 CLEARWATER OAKS DRIVE WEST
JACKSONVILLE, FL 32223

New Principal Place of Business:

2980 STANFIELD AVENUE
ORLANDO, FL 32814

Current Mailing Address:

11906 CLEARWATER OAKS DRIVE WEST
JACKSONVILLE, FL 32223

New Mailing Address:

2980 STANFIELD AVENUE
ORLANDO, FL 32814

FEI Number: 59-3718777

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALDERMAN, ERIN
11906 CLEARWATER OAKS DRIVE WEST
JACKSONVILLE, FL 32223 US

Name and Address of New Registered Agent:

ALDERMAN, ERIN
2980 STANFIELD AVENUE
ORLANDO, FL 32814 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:

04/15/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ALDERMAN, ERIN
Address: 11906 CLEARWATER OAKS DRIVE WEST
City-St-Zip: JACKSONVILLE, FL 32223

Title: VT () Delete
Name: ALDERMAN, ROBERT
Address: 11906 CLEARWATER OAKS DRIVE WEST
City-St-Zip: JACKSONVILLE, FL 32223

Title: S () Delete
Name: CIRIELLO, NADA
Address: 815 LA SALLE STREET
City-St-Zip: JACKSONVILLE, FL 32207

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change () Addition
Name: ALDERMAN, ERIN
Address: 2980 STANFIELD AVENUE
City-St-Zip: ORLANDO, FL 32814

Title: VT (X) Change () Addition
Name: ALDERMAN, ROBERT
Address: 2980 STANFIELD AVENUE
City-St-Zip: ORLANDO, FL 32814

Title: S (X) Change () Addition
Name: CIRIELLO, NADA
Address: 2980 STANFIELD AVENUE
City-St-Zip: ORLANDO, FL 32814

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: ERIN ALDERMAN

PRES

04/15/2009

Electronic Signature of Signing Officer or Director

Date