

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 19, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P01000089564</b>	
1. Entity Name INTERIORS BY DESIGN OF JACKSONVILLE, INC.	
Principal Place of Business 9309 OLD KINGS RD S STE 2 JACKSONVILLE, FL 32257	Mailing Address 9309 OLD KINGS RD S STE 2 JACKSONVILLE, FL 32257



01192007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3743139	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent  WEIDLE, TERRI 12826 CHETS CREEK DR N JACKSONVILLE, FL 32224	<b>DO NOT WRITE IN THIS SPACE</b>
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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 TERRI L. WEIDLE / President DATE 4/15/07  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00**

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

<b>10. OFFICERS AND DIRECTORS</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD WEIDLE, TERRI 12826 CHETS CREEK DR N JACKSONVILLE, FL 32224
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IN THIS SPACE**

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04/30/07-80031-016 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: TERRI L. WEIDLE DATE 4/15/07 DAYTIME PHONE # (904) 733-1221  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR