

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000048082

FILED
Mar 31, 2009
Secretary of State

Entity Name: ANDECOR RENOVATORS, INC.

Current Principal Place of Business:

17050 ALICO COMMERCE CT
NAPLES, FL 33967 US

New Principal Place of Business:

4080 24TH AVENUE NE
NAPLES, FL 34120 US

Current Mailing Address:

P.O. BOX 111043
NAPLES, FL 34108 US

New Mailing Address:

4080 24TH AVENUE NE
NAPLES, FL 34120 US

FEI Number: 04-3660076

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ANDERSON, HEATHER K
17050 ARICO COMMERCE CRT 5
FT MYERS, FL 33967 US

Name and Address of New Registered Agent:

DELAMARTER, HEATHER K
4080 24TH AVENUE NE
NAPLES, FL 34120 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: HEATHER KHOURI DELAMARTER

03/31/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ANDERSON, HEATHER K
Address: 17050 ARICO COMMER CT 5
City-St-Zip: FT MYERS, FL 33967 US

Title: VD () Delete
Name: ANDERSON, HEATHER
Address: 17050 ALICO COMMERCE CRT 5
City-St-Zip: FT MYERS, FL 33967 US

Title: STD () Delete
Name: ANDERSON, HEATHER
Address: 17050 ALICO COMMERCE CRT 5
City-St-Zip: FT. MYERS, FL 33967

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DELAMARTER, HEATHER K
Address: 4080 24TH AVENUE NE
City-St-Zip: NAPLES, FL 34120 US

Title: VD (X) Change () Addition
Name: DELAMARTER, HEATHER K
Address: 4080 24TH AVENUE NE
City-St-Zip: NAPLES, FL 34120 US

Title: STD (X) Change () Addition
Name: DELAMARTER, HEATHER K
Address: 4080 24TH AVENUE NE
City-St-Zip: NAPLES, FL 34120

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: HEATHER K. DELAMARTER

PD

03/31/2009

Electronic Signature of Signing Officer or Director

Date