

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000009533

FILED  
Jan 21, 2010  
Secretary of State

**Entity Name:** ANTIQUES & TREASURES OF PLANT CITY, INC.

**Current Principal Place of Business:**

107 NORTH COLLINS STREET  
PLANT CITY, FL 33563

**New Principal Place of Business:**

**Current Mailing Address:**

107 NORTH COLLINS STREET  
PLANT CITY, FL 33563

**New Mailing Address:**

**FEI Number:** 02-0670134

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ROCHA, CLAUDETTE D  
4560 MEADOWOOD DRIVE  
MULBERRY, FL 33860 US

**Name and Address of New Registered Agent:**

GRAY, QUAY D  
107 N. COLLINS ST.  
PLANT CITY,, FL 33563 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:** QUAY GRAY

01/21/2010

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** GRAY, QUAY  
**Address:** 708 N KNIGHT ST  
**City-St-Zip:** PLANT CITY, FL 33563

**Title:** V  
**Name:** OGDEN, GAIL  
**Address:** 2604 ROBIN DR.  
**City-St-Zip:** PLANT CITY, FL 33566

**Title:** S  
**Name:** LEIGHTON, STEPHANIE L  
**Address:** 1307 S. EVERS ST.  
**City-St-Zip:** PLANT CITY, FL 33563

**Title:** T  
**Name:** ROCHA, PETE  
**Address:** 4560 MEADOWOOD DR  
**City-St-Zip:** MULBERRY, FL 33860

I hereby 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 all other like empowered.

**SIGNATURE:** QUAY GRAY

P

01/21/2010

Electronic Signature of Signing Officer or Director

Date