

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

Apr 14, 2005 08:00 AM
Secretary of State

DOCUMENT # P03000022499

1. Entity Name
INTERIORS. INTERIORS. INTERIORS., INC.



Principal Place of Business
**938 NORTH COLLIER BLVD
MARCO ISLAND, FL 34145**

Mailing Address
**938 NORTH COLLIER BLVD
MARCO ISLAND, FL 34145**



04092005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
75-3103287

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**ELLIOT, GARY
360 GUMBO LIMBO LANE
MARCO ISLAND, FL 34145**

**DO NOT WRITE
IN THIS SPACE**

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 *Gary Elliott*
Signature, typed or printed name of registered agent and title if applicable

GARY ELLIOTT
(NOTE: Registered Agent signature required when reinstating)

APRIL 9, 2005
DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PTS
ELLIOTT, SANDRA
360 GUMBO LIMBO LN
MARCO ISLAND, FL 34145**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VPS
ELLIOTT, GARY
360 GUMBO LIMBO LANE
MARCO ISLAND, FL 34145**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
NEBEL, LYNN DAVIS
690 PELICAN COURT
MARCO ISLAND, FL 34145**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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04/14/05-80103-020 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: *Gary Elliott* **VP** GARY ELLIOTT 4/9/2005 239-642-5010
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #