2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 22, 2006
Secretary of State

DOCUMENT# P03000067181

Entity Name: KELLIE O. & CO. BOTANICAL DESIGNS, INC.

Current Principal Place of Business:

2400 WILLIAMS RD
WINTER GARDEN, FL 34787

New Principal Place of Business:

51 NORTHWEST 19TH STREET
HOMESTEAD, FL 33030

Current Mailing Address:

2400 WILLIAMS RD
WINTER GARDEN, FL 34787

New Mailing Address:

51 NORTHWEST 19TH STREET
HOMESTEAD, FL 33030

FEI Number: 04-3763052 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WELLS, BARBARA D
2400 WILLIAMS RD
WINTER GARDEN, FL 34787 US

Name and Address of New Registered Agent:

WELLS, BARBARA D
51 NORTHWEST 19TH STREET
HOMESTEAD, FL 33030 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: BARBARA D. WELLS 05/22/2006
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: MS ( ) Delete
Name: WELLS, BARBARA D
Address: 2400 WILLIAMS RD
City-St-Zip: WINTER GARDEN, FL 34787

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MS (X) Change ( ) Addition
Name: WELLS, BARBARA D
Address: 51 NORTHWEST 19TH STREET
City-St-Zip: HOMESTEAD, FL 33030

I hereby certify that the information supplied with this filing does not qualify for the 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: BARBARA D. WELLS MS 05/22/2006
Electronic Signature of Signing Officer or Director Date