## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03939

Entity Name: NEW TRADITIONS INTERIORS, LTD. COMPANY

FILED Feb 10, 2008 Secretary of State

**Current Principal Place of Business:** New Principal Place of Business:

211 FOURTH AVE 733 NORTH DRIVE INDIALANTIC, FL 32903 US

SUITE A

MELBOURNE, FL 32934 US

**Current Mailing Address: New Mailing Address:** 

211 FOURTH AVE 733 NORTH DRIVE

INDIALANTIC, FL 32903 US SUITE A

MELBOURNE, FL 32934 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

FEI Number: 42-1190887 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

HARRIS LIZABETH L HARRIS LIZABETH L 8800 SOUTH TROPICAL TRAIL 3950 PINEWOOD RD

MERRITT ISLAND, FL 32952 US MELBOURNE, FL 32934 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: LIZ HARRIS 02/10/2008

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: PSD ( ) Delete Title: **PSD** (X) Change ( ) Addition

HARRIS, LIZABETH L HARRIS, LIZABETH L Name: Name: 8800 SOUTH TROPICAL TRAIL 3950 PINEWOOD RD. Address: Address: City-St-Zip: MERRITT ISLAND, FL 32952 City-St-Zip: MELBOURNE, FL 32934

Title: VTD Title: VTD (X) Change ( ) Addition () Delete

Name: HARRIS, LIZABETH. Name: HARRIS, LIZABETH. 8800 SOUTH TROPICAL TRAIL Address: 3950 PINEWOOD RD. Address: MERRITT ISLAND, FL 32952 MELBOURNE, FL 32934 City-St-Zip: City-St-Zip:

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: LIZ HARRIS **PSD** 02/10/2008