

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000028535

FILED  
May 08, 2007  
Secretary of State

Entity Name: CLASSIC INTERIOR RENOVATORS, INC.

## Current Principal Place of Business:

3329 STATE RD 13 N  
JACKSONVILLE, FL 32259

## New Principal Place of Business:

3329 STATE RD 13 N  
SWITZERLAND, FL 32259

## Current Mailing Address:

3329 STATE RD 13 N  
JACKSONVILLE, FL 32259

## New Mailing Address:

3329 STATE RD 13 N  
SWITZERLAND, FL 32259

FEI Number: 86-1096692

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SLOTT, ARNOLD H  
SLOTT & BAKER  
334 E DUVAL ST  
JACKSONVILLE, FL 322022718 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: HARPER, JAMES D  
Address: 3329 STATE RD 13 N  
City-St-Zip: JACKSONVILLE, FL 32259

Title: S ( ) Delete  
Name: WILLIAMS, MARSHALL L  
Address: 1946 GREEN MEADOWS DR  
City-St-Zip: MIDDLEBURG, FL 32068

Title: VP ( ) Delete  
Name: HARPER, EMILY A  
Address: 3329 SR 13 N  
City-St-Zip: JACKSONVILLE, FL 32259

Title: T ( ) Delete  
Name: GUESS, JAMES L  
Address: 4971 WINDMILL CT  
City-St-Zip: MIDDLEBURG, FL 32068

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: HARPER, JAMES D  
Address: 3329 STATE RD 13 N  
City-St-Zip: SWITZERLAND, FL 32259

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP (X) Change ( ) Addition  
Name: HARPER, EMILY A  
Address: 3329 SR 13 N  
City-St-Zip: SWITZERLAND, FL 32259

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: JAMES D. HARPER

DP

05/08/2007

Electronic Signature of Signing Officer or Director

Date