## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000100905

Entity Name: TIFFIN INTERIORS, INC.

FILED Apr 28, 2006 Secretary of State

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

60 ISLAND DRIVE EASTPOINT, FL 32328

Current Mailing Address: New Mailing Address:

POST OFFICE BOX 748 EASTPOINT, FL 32328

FEI Number: 20-2315961 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:

TIFFIN, BARBARA J DAVIS, LACYE
60 ISLAND DRIVE 111 SONGBIRD AVE

EASTPOINT, FL 32328 US CRAWFORDVILLE, FL 32327 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: LACYE DAVIS 04/28/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S/T ( ) Delete Title: DVST (X) Change ( ) Addition

Name: TIFFIN, BARBARA J Name: TIFFIN, BARBARA J
Address: 60 ISLAND DRIVE Address: 1635 GANNETT TRAIL

City-St-Zip: EASTPOINT, FL 32328 City-St-Zip: ST GEORGE ISLAND, FL 32328

Title: P ( ) Delete Title: DP (X) Change ( ) Addition Name: DAVIS, LACYE DAVIS, LACYE

Address: 60 ISLAND DRIVE Address: 111 SONGBIRD AVE
City-St-Zip: EASTPOINT, FL 32328 City-St-Zip: CRAWFORDVILLE, FL 32327

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

Name: Name: TIFFIN, CHARLES
Address: Address: 1635 GANNETT TRAIL

City-St-Zip: City-St-Zip: ST GEORGE ISLAND, FL 32328

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: LACYE DAVIS DP 04/28/2006