

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Aug 10, 2006 8:00 am**  
**Secretary of State**

08-10-2006 90001 031 \*\*\*150.00

DOCUMENT # P05000000814

1. Entity Name  
ERIC THOMAS INTERNATIONAL DESIGNS, INC.



Principal Place of Business  
357 6TH AVE. W.  
BRADENTON, FL 34205

Mailing Address  
357 6TH AVE. W.  
BRADENTON, FL 34205

50024882



2. Principal Place of Business

3. Mailing Address

1845 San Marco Rd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

07062006

Chg-P

CR2E034 (11/05)

City & State

City & State

Marco Is.

4. FEI Number

20-2095212

Applied For

Not Applicable

Zip

Country

Zip

34145

Country

U.S.A

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SHILLING, ERIC  
357 6TH AVE. W.  
BRADENTON, FL 34205

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**Due by September 6, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be**  
**Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE PD  
NAME SHILLING, ERIC ☐ Delete  
STREET ADDRESS 1227 ANTIGUA CT.  
CITY-ST-ZIP MARCO ISLAND, FL 34145

TITLE VD  
NAME GOODING, THOMAS L ☐ Delete  
STREET ADDRESS 10303 PALMBROOKE TERR.  
CITY-ST-ZIP BRADENTON, FL 34202

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #