

# **2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P05000090054

**FILED**  
**Jul 02, 2007**  
**Secretary of State**

**Entity Name:** OUT THERE ACCENTS ENTERPRISES, INC.

**Current Principal Place of Business:**

1274 SABAL GARDENS DR.  
N. FT. MYERS, FL 33903

**New Principal Place of Business:**

1276 SABAL GARDENS DR.  
N. FT. MYERS, FL 33903

**Current Mailing Address:**

1274 SABAL GARDENS DR.  
N. FT. MYERS, FL 33903

**New Mailing Address:**

1276 SABAL GARDENS DR.  
N. FT. MYERS, FL 33903

**FEI Number:** 20-3093069

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PHILLIPS, JEFFERY L.  
1274 SABAL GARDENS DR.  
N. FT. MYERS, FL 33903 US

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

FAUGHT, DONNA  
1276 SABAL GARDENS DR.  
N. FT. MYERS, FL 33903 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: DONNA FAUGHT

07/02/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PT ( ) Delete  
Name: PHILLIPS, JEFFERY L.  
Address: 1274 SABAL GARDENS DR.  
City-St-Zip: N. FT. MYERS, FL 33903

Title: VS ( ) Delete  
Name: FAUGHT, DONNA  
Address: 1276 SABAL GARDENS DR.  
City-St-Zip: N. FT. MYERS, FL 33903

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PT (X) Change ( ) Addition  
Name: FAUGHT, DONNA  
Address: 1276 SABAL GARDENS DR.  
City-St-Zip: N. FT. MYERS, FL 33903

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: DONNA FAUGHT

PRES

07/02/2007

Electronic Signature of Signing Officer or Director

Date