

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000028333

FILED
Apr 13, 2009
Secretary of State

Entity Name: ENCHANTED ANTIQUES & HOME DECOR CO.

Current Principal Place of Business:

8022 NARANJA DR W
JACKSONVILLE, FL 32217

New Principal Place of Business:

6058 SAN JOSE BOULEVARD
JACKSONVILLE, FL 32217

Current Mailing Address:

8022 NARANJA DR W
JACKSONVILLE, FL 32217

New Mailing Address:

6058 SAN JOSE BOULEVARD
JACKSONVILLE, FL 32217

FEI Number: 76-0817453

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MULLIN, KELLEY A
8022 NARANJA DR W
JACKSONVILLE, FL 32217 US

Name and Address of New Registered Agent:

MULLIN, KELLEY A PRES.
8022 NARANJA DR W
JACKSONVILLE, FL 32217 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: KELLEY A. MULLIN

04/13/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MULLIN, KELLEY A
Address: 8022 NARANJA DR W
City-St-Zip: JACKSONVILLE, FL 32217

Title: V () Delete
Name: MULLIN, GRAT M
Address: 479 TIVOLI DR
City-St-Zip: JACKSONVILLE, FL 32259

Title: T () Delete
Name: MULLIN, MADONNA M
Address: 479 TIVOLI DR
City-St-Zip: JACKSONVILLE, FL 32259

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: KELLEY A. MULLIN

PRES

04/13/2009

Electronic Signature of Signing Officer or Director

Date