

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jun 18, 2007 8:00 am
Secretary of State

03-02-2007 90023 029 ***150.00

DOCUMENT # P06000057162			
1. Entry Name READY TO SELL, INC.			
Principal Place of Business 440 S. PERRY STREET LAWRENCEVILLE GA 30045		Mailing Address 440 S. PERRY STREET LAWRENCEVILLE GA 30045	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. Name and Address of Current Registered Agent HOCHGERTLE, DEBRA K 8271 GULF BLVD. UNIT 803 NAVARRE BEACH FL 32566		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of New Registered Agent		7. Name and Address of New Registered Agent	
Name		Name	
Street Address (P.O. Box Number is Not Acceptable)		Street Address (P.O. Box Number is Not Acceptable)	
City		City	
FL		FL	
Zip Code		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 _____ DATE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee Will Be \$550.00 Make Check Payable to Florida Department of State.		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CEO HOCHGERTLE, DEBRA K 810 MILLVALE PLACE LAWRENCEVILLE GA 30044 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PEO HOCHGERTLE, KENT A 810 MILLVALE PLACE LAWRENCEVILLE GA 30044 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: <u>Debra K. Hochgertle</u>		Date: <u>2/23/07</u> Daytime Phone #: <u>770)995-6023</u>	

ATTACHMENT

66019260

#P06000057162

Unique Interior Designs, Inc.
DBA Complete Property Resources
440 South Perry Street
Lawrenceville, GA 30045
770-995-6003

June 2, 2007

To Whom It May Concern:

Please contact me with any questions that you may have. We have tried repeatedly to contact you by phone to get clarification on this matter. Please see change to form and contact me as needed.

Thank you.

Debra K. Hochgertle