2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000057070

Entity Name: DESIGN HARMONY OF SOUTHWEST FLORIDA, INC.

FILED Apr 17, 2008 Secretary of State

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

17480 OLD HARMONY DR #101 17222 ALICO CENTER ROAD FT MYERS, FL 33908

SUITE 5

FT MYERS, FL 33967

Current Mailing Address: New Mailing Address:

17480 OLD HARMONY DR #101 17222 ALICO CENTER ROAD FT MYERS, FL 33908

SUITE 5

FT MYERS, FL 33967

FEI Number: 35-2298660 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:

REBSAMEN, ROBYN PUSKAS, ROBYN 17480 OLD HARMONY DR #101 17222 ALICO CENTER ROAD FT MYERS, FL 33908 SUITE 5

FT MYERS, FL 33967 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: ROBYN PUSKAS 04/17/2008

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

REBSAMEN, ROBYN PUSKAS, ROBYN Name: Name:

17480 OLD HARMONY DR #101 Address: 17222 ALICO CENTER ROAD Address: City-St-Zip: FT MYERS, FL 33908 City-St-Zip: FT MYERS, FL 33967

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: ROBYN PUSKAS **DPTS** 04/17/2008

Electronic Signature of Signing Officer or Director

Date