

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000085855

Entity Name: & HOME INTERIORS, INC

FILED
Jan 07, 2009
Secretary of State

Current Principal Place of Business:

619 N CITRUS AVENUE
CRYSTAL RIVER, FL 34428

New Principal Place of Business:

Current Mailing Address:

619 N CITRUS AVENUE
CRYSTAL RIVER, FL 34428

New Mailing Address:

FEI Number: 26-3531698

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MUMFORD, JANN S
5682 W HUNTERS RIDGE CIRCLE
LECANTO, FL 34461 US

Name and Address of New Registered Agent:

LEE, AMANDA W
10970 N. RIVER RANCH PATH
CRYSTAL RIVER, FL 34428 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: AMANDA W. LEE

01/07/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PS () Delete
Name: LEE, AMANDA W
Address: 10970 N RIVER RANCH PATH
City-St-Zip: CRYSTAL RIVER, FL 344282736

Title: VT () Delete
Name: MUMFORD, JANN S
Address: P.O. BOX 2481
City-St-Zip: CRYSTAL RIVER, FL 344232481

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: JANN S. MUMFORD

VT

01/07/2009

Electronic Signature of Signing Officer or Director

Date