2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000109031

City-St-Zip:

APOPKA, FL 33712

Entity Name: HANSON INTERIORS, INC.

FILED Apr 23, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
	EVOLENT ST D, FL 32751				
Current Mailing Address:			New Mailing Address:		
	EVOLENT ST D, FL 32751				
FEI Number	: 90-0435736	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
	ELIENID EVOLENT ST D, FL 32751	US			
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATUI	RE:				
	Electro	nic Signature of Registered Ag	ent	Date	
Election Ca	mpaign Financir	ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	P (HANSON, ELIE 1345 BENEVO MAITLAND, FL	LENT ST	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V (HANSON, LAN 1345 BENEVC MAITLAND, FL	LENT ST	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	S (X LUNSFORD, E 2204 ORCHAF		Title: Name: Address:	() Change () Addition	

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.

City-St-Zip:

SIGNATURE: ELIENID HANSON P 04/23/2009