

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P40130

1. Corporation Name

Nature Indoors, Inc.

Principal Place of Business

Mailing Address

3000 Graystone Drive
Semmes, AL 36575

3000 Graystone Drive
Semmes, AL 36575

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

C T Corporation System
1200 South Pine Island Rd.
Plantation FL 33324

3. Date Incorporated or Qualified
08/14/1992

3a. Date of Last Report
03/21/1995

4. FEI Number
63-0911372

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of person or persons authorized to register the corporation

Signature of Registered Agent (Signature required if agent is not a corporation)

DATE

12. OFFICERS AND DIRECTORS

TITLE DP
NAME Ellis, James
STREET ADDRESS 3000 Graystone Dr.
CITY-STATE-ZIP Semmes AL 36575 ☐ DELETE

TITLE DVP
NAME Wyers, William
STREET ADDRESS 7870 Oakhill Dr.
CITY-STATE-ZIP Semmes, AL 36575 ☐ DELETE

TITLE S
NAME Mitchell, Charlotte Michelle
STREET ADDRESS P.O. Box 801 N/A Graystone Dr.
CITY-STATE-ZIP Semmes AL 36575 ☐ DELETE

TITLE T
NAME Ellis, Margaret
STREET ADDRESS 3000 Graystone Dr.
CITY-STATE-ZIP Semmes, AL 36575 ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY-STATE-ZIP

21 TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY-STATE-ZIP

31 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY-STATE-ZIP

41 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY-STATE-ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY-STATE-ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 CITY-STATE-ZIP

Margaret Ellis

100001869461
-06/20/96--01039--046
***225.00

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Charlotte Michelle Mitchell
Michelle Mitchell

5-22-96

(334) 649-8001

CR2E034 (12/95)