

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000009775

FILED
Jan 14, 2009
Secretary of State

Entity Name: DRAWER FULL OF LINGERIE III, INC.

Current Principal Place of Business:

2200 W GLADES ROAD
#915
BOCA RATON, FL 33431

New Principal Place of Business:

Current Mailing Address:

2200 W GLADES ROAD
#915
BOCA RATON, FL 33431

New Mailing Address:

FEI Number: 59-2486242

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LENNON, DONNA
2200 W GLADES RD
STE 915
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LENNON, DONNA
Address: 2200 WEST GLADES ROAD STE 915
City-St-Zip: BOCA RATON, FL 33431

Title: D () Delete
Name: SILVERMAN, DENISE
Address: 2200 WEST GLADES ROAD STE 915
City-St-Zip: BOCA RATON, FL 33431

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: LENNON, DONNA PRESIDE
Address: 2200 WEST GLADES ROAD STE 915
City-St-Zip: BOCA RATON, FL 33431

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: DONNA LENNON

PRES

01/14/2009

Electronic Signature of Signing Officer or Director

Date