

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P94000015583

**FILED**  
**Feb 21, 2011**  
**Secretary of State**

**Entity Name:** ARCHITECTURAL INTERIORS, INCORPORATED

**Current Principal Place of Business:**

333 N. KNOWLES AVE  
WINTER PARK, FL 32789 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 598  
WINTER PARK, FL 32790 US

**New Mailing Address:**

**FEI Number:** 59-3235993

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

REEVES, SARA W  
255 SYLVAN BLVD.  
WINTER PARK, FL 32789 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

**OFFICERS AND DIRECTORS:**

Title: PT  
Name: REEVES, SARA W  
Address: 255 SYLVAN BLVD  
City-St-Zip: WINTER PARK, FL 32789 US

Title: VPS  
Name: REEVES, IAN A  
Address: 17400 SUNSET DRIVE  
City-St-Zip: WINTER PARK, FL 32789

I hereby 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 all other like empowered.

SIGNATURE: SARA W. REEVES

PT

02/21/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date