

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2006 8:00 am
Secretary of State

04-20-2006 90206 026 ***150.00

DOCUMENT # P95000044671

1. Entity Name
THE FABRIC SOURCE, INC.



Principal Place of Business

9755 US HWY 98 W
DESTIN, FL 32550 US

Mailing Address

PO BOX 6548
DESTIN, FL 32550 US

2. Principal Place of Business

382 GOLFVIEW DR
Suite, Apt. #, etc.

3. Mailing Address

PO Box 6023
Suite, Apt. #, etc.



03302006

Chg-P

CR2E034 (11/05)

City & State

MIRAMAR Beach, FL

City & State

MIRAMAR Beach, FL 32550

4. FEI Number

59-3322660

Applied For

Not Applicable

Zip

32550

Country

US

Zip

32550

Country

US

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GRIFFITH, GREGORY A
382 GOLF VIEW DRIVE
DESTIN, FL 32550

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Gregory A Griffith

(NOTE: Registered Agent signature required when reinstating)

DATE

4/18/06

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PSTD
GRIFFITH, GREGORY A
P O BOX 6548
DESTIN, FL 32550 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
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CITY - ST - ZIP
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STREET ADDRESS
CITY - ST - ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☒ Change ☐ Addition
PO Box 6023
MIRAMAR Beach, FL 32550

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
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☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Gregory A Griffith

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/17/06

850-650-8077

Day

Daytime Phone #