

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000015120

FILED  
May 01, 2007  
Secretary of State

Entity Name: THREADS AND MORE, INCORPORATED

## Current Principal Place of Business:

9009 REGENCY SQUARE BOULEVARD  
JACKSONVILLE, FL 32211

## New Principal Place of Business:

220 PONTE VEDRA PARK DRIVE  
160  
PONTE VEDRA BEACH, FL 32082

## Current Mailing Address:

9009 REGENCY SQUARE BOULEVARD  
JACKSONVILLE, FL 32211

## New Mailing Address:

220 PONTE VEDRA PARK DRIVE  
160  
PONTE VEDRA BEACH, FL 32082

FEI Number: 59-3377625

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

STEIN, TRACEY  
9009 REGENCY SQUARE BLVD  
JACKSONVILLE, FL 32211 US

## Name and Address of New Registered Agent:

STEIN, TRACEY  
220 PONTE VEDRA PARK DRIVE  
160  
PONTE VEDRA BEACH, FL 32082 US

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:

05/01/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CEO ( ) Delete  
Name: TRACEY STEIN,  
Address: 9009 REGENCY SQ. BLVD  
City-St-Zip: JACKSONVILLE, FL

Title: VP ( ) Delete  
Name: ALLISON ROBBINS,  
Address: 9009 REGENCY SQ BLVD  
City-St-Zip: JACKSONVILLE, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change ( ) Addition  
Name: TRACEY STEIN,  
Address: 220 PONTE VEDRA PARK DRIVE #160  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: VP (X) Change ( ) Addition  
Name: ALLISON ROBBINS,  
Address: 220 PONTE VEDRA PARK DRIVE #160  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

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: ALLISON ROBBINS

VP

05/01/2007

Electronic Signature of Signing Officer or Director

Date