## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P96000078692

Entity Name: ARCADIA TEA ROOM, INC.

FILED Apr 29, 2007 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business:   |
|--------------------------------------|------------------------------------|
| Current Finicipal Flace of Business. | New Fillicipal Flace of Busiliess. |

117 WEST OAK STREET 12 WEST OAK STREET ARCADIA, FL 34266 ARCADIA, FL 34266

Current Mailing Address: New Mailing Address:

117 WEST OAK STREET12 WEST OAK STREETARCADIA, FL 34266ARCADIA, FL 34266

FEI Number: 59-3401589 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

AMES, ANDREW T 128 WEST OAK STREET ARCADIA, FL 34266 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DVTS ( ) Delete Title: (X) Change ( ) Addition PANOS, BARBARA MCCLURG, BARBARA PANOS Name: Name: 117 WEST OAK STREET 12 WEST OAK STREET Address: Address: City-St-Zip: ARCADIA, FL 34266 City-St-Zip: ARCADIA, FL 34266

Title: PVS ( ) Delete Title: PVS (X) Change ( ) Addition

 Name:
 MCCLURG, DÓN
 Name:
 MCCLURG, DÓNALD P

 Address:
 117 WEST OAK STREET
 Address:
 12 WEST OAK STREET

 City-St-Zip:
 ARCADIA, FL 34266
 City-St-Zip:
 ARCADIA, FL 34266

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: DONALD P. MCCLURG PVS 04/29/2007