

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000053249

FILED
Apr 07, 2005
Secretary of State

Entity Name: MAURICE'S OLDE WORLD FURNISHINGS, INC.

Current Principal Place of Business:

2532 WEST INDIANTOWN ROAD
JUPITER, FL 33458

New Principal Place of Business:

625 SOUTH ORLANDO AVENUE
WINTER PARK, FL 32789

Current Mailing Address:

2532 WEST INDIANTOWN ROAD
JUPITER, FL 33458

New Mailing Address:

FEI Number: 65-0845433 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONKER, RUDOLF
950 JUPITER PARK DR.
JUPITER, FL 33458 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: DP () Delete
Name: JONKER, MAURICE R
Address: 6026 ADAMS ST.
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: V () Delete
Name: LINCOURT, STEVE
Address: 673 BALMORAL ROAD
City-St-Zip: WINTER PARK, FL 32789

Title: S () Delete
Name: JONKER, ELISABETH M
Address: 6026 ADAMS STREET
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: D () Delete
Name: JONKER, TONY S
Address: 950 JUPITER DR.
City-St-Zip: JUPITER, FL 33458

Title: D () Delete
Name: JONKER, RUDOLF
Address: 950 JUPITER DR.
City-St-Zip: JUPITER, FL 33458

Title: T () Delete
Name: KELLY, NATASJA
Address: 2532 W. INDIANTOWN ROAD
City-St-Zip: JUPITER, FL 33458

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: JONKER, MAURICE R
Address: 14242 LEEWARD WAY
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: JONKER, ELISABETH M
Address: 14242 LEEWARD WAY
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: NATASJA KELLY

T

04/07/2005

Electronic Signature of Signing Officer or Director

Date