

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000052229

Entity Name: N & N INTERIOR DESIGNS, INC.

FILED  
Mar 23, 2005  
Secretary of State

## Current Principal Place of Business:

549 TETON ST  
LAKE MARY, FL 32746

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 951858  
LAKE MARY, FL 32795

## New Mailing Address:

FEI Number: 59-3582759

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GRAY, N DWANE JR  
GREENSPOON, MARDER, HIRSCHFELD ET AL  
135 W CENTRAL BLVD, SUITE 1100  
ORLANDO, FL 32801 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: D ( ) Delete  
Name: WOLF, NANCY B  
Address: 549 TETON ST  
City-St-Zip: LAKE MARY, FL 32746

Title: D ( ) Delete  
Name: BORCK, NANCY L  
Address: 549 TETON ST  
City-St-Zip: LAKE MARY, FL 32746

Title: VP ( ) Delete  
Name: GRAY, DWAYNE N JR  
Address: 135 WEST CENTRAL BLVD., STE 1100  
City-St-Zip: ORLANDO, FL 32801

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: NANCY L. BORCK

D

03/23/2005

Electronic Signature of Signing Officer or Director

Date