## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S21647

FILED Apr 28, 2009 Secretary of State

Entity Name: REMA'S DRAPERIES AND ETC., INC.

Current Principal Place of Business: New Principal Place of Business:

1106 S EDGEWOOD AVE JACKSONVILLE, FL 32205

Current Mailing Address: New Mailing Address:

1106 S EDGEWOOD AVE JACKSONVILLE, FL 32205

FEI Number: 59-3041701 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:

PETE ORLANDO, CPA, PA 4745 SUTTON PARK COURT SUITE 101 JACKSONVILLE, FL 32224 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:

Name:MURPHY, JIMMIEName:MURPHY, JIMMIEAddress:27742 CONNER NELSON ROADAddress:27742 CONNER NELSON ROAD

City-St-Zip: HILLIARD, FL 32046 City-St-Zip: HILLIARD, FL 32046

Title: P ( ) Delete Title: PD (X) Change ( ) Addition

Name: MURPHY, LATRELLE Name: MURPHY, LATRELLE

Address: 27742 CONNER NELSON ROAD Address: 27742 CONNER NELSON ROAD

City-St-Zip: HILLIARD, FL 32046 City-St-Zip: HILLIARD, FL 32046

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: LATRELLE MURPHY P 04/28/2009