FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # \$98992

(8)

LAWRENCE DAVID INTERIORS, INC.

Principal Place of Business

Mailing Address

161 MAYFAIR COURT SANFORD FL 32771

经股票的股票的 化含金 病毒的 经股份工工经验 经收收 第三次经验或证明经验是证据的证明的一个过去的过去式和过去分词

161 MAYFAIR COURT SANFORD FL 32771-7708

FILED Apr 30 1997 8:00am Secretary of State



	*** *********************************	ONITION TE CETTI-					
					3. Date Incorporated or Qualified	I	Last Report
2. Principal i	Place of Business	2a. Mailing Address			12/03/1991 4. FEI Number	05/01/	
21	. 1200 0. 200/1000	26	ı		I		Applied For Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.			59-3095935		8.75 Additional
22		27			5. Certificate of Status Desired	□ »	Fee Required
City & Sta	ite	City & State			6. Election Campaign Financing		 _
23		28			Trust Fund Contribution		5.00 May Be Added to Fees
Zip	Country	Zip	Cour	ntry	B. This corporation has liability for		
24	25	29	30	•		Yes DN	
	9. Name and Address of Curr				10. Name and Address of New Ro	egistered Ager	nl
TAY	/LOR, PAULA M.			81 Name			
	4 HILLCREST STREET			82 Street A	Address (P.O. Box Number is Not Accepta	blel	
	ALNDO FL 32803		oz Street Ad		suuress (r.O. box Nulfiber is Not Accepta	Diej	
-				83			
			ļ	04 63			T = - 2 ·
				64 City		FL 85	Zip Code
11. Pursuant	to the provisions of Sections 607.0	502 and 607.1508, Florida \$	Statutes, the ab	ove-named	corporation submits this statement for the	purpose of cha	nging its registered
office or agent. L	registered agent, or both, in the Sta am familiar with, and accept the obl	ate of Florida, Such change ligations of Section 607,050	was authorized	by the corp	corporation submits this statement for the sonation's board of directors. I hereby acce	pt the appointn	nent as registered
		agained by bootion bot doc	o, i ionda olali				
SIGNATURE	Signature, typed or printed name of registered a	agent and little if applicable	(NOTE Registered	Agent signature	required whon reinstating)	DATE	
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFI	CERS AND DIR	ECTORS IN 12
TITLE	PD	DELET	E 1.1 TIT	LE			Change Addition
NAME	SEARCY, MICKEY P.		1.2 NA	ME			
STREET ADDRESS	161 MAYFAIR COURT		1.3 \$10	REE1 ADDRESS			·
CITY-ST-ZIP	SANFORD FL			Y - S1 - ZIP			
TITLE	ST	DELET	2.1 111	LE			Change Addition
NAME	SEARCY, MICKEY P.		2.2 NA	ME			
STREET ADDRESS	161 MAYFAIR COURT		2.3 \$18	REE1 ADDRESS			
CITY-ST-ZIP	SANFORD FL		2. 4 CI	IY-ST-ZIP			
TITLE		DELETI	3.1 T(T	LE			Change Addition
NAME			3.2 NA	ME .			
STREET ADDRESS			3.3 ST	REET ADDRESS			
CITY-ST-ZIP	<u> </u>		3.4. CI	Y-S1-7 P			
TITLE		DELET					Change Addition
NAME			4.2 NA	ME			
STREET ADDRESS			4.3 ST	EET ADDRESS			
CITY-ST-ZIP			4.4 CIT	Y-ST-7IP			
TITLE		DELETI	5 1 TH	F			Change Addition
NAME			5.2 NA	VIE			
STREET ADDRESS			5.3 STF	REET ADDRESS			
CITY-ST-ZIP				Y~ST-ZIP			
TITLE		DELETI					Change Addition
NAME			6.2 NA	_{vft}			
STREET ADDRESS				REET ADDRESS			
CITY-ST-ZIP				Y-ST-ZIP			
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I do hereby certify that the information supplied with this filing does not qualify to the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

4/25/100 30