

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000147289

FILED
Apr 29, 2005
Secretary of State

Entity Name: FURNITURE BY GEORGE, INC.

Current Principal Place of Business:

5200 CENTRAL AVE
ST PETERSBURG, FL 33707

New Principal Place of Business:

Current Mailing Address:

5200 CENTRAL AVE
ST PETERSBURG, FL 33707

New Mailing Address:

FEI Number: 03-0551263

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRAHAM, PETER D
5200 CENTRAL AVE
ST PETERSBURG, FL 33707 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: GRAHAM, PETER D
Address: 5200 CENTRAL AVE
City-St-Zip: ST PETERSBURG, FL 33707

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P/D () Change (X) Addition
Name: COLE, GEORGE R P
Address: 7845 SUNDOWN DR. N.
City-St-Zip: ST. PETERSBURG, FL 33709 US

Title: V/D () Change (X) Addition
Name: WILSON-COLE, SUSAN J V/D
Address: 7845 SUNDOWN DR. N.
City-St-Zip: ST. PETERSBURG, FL 33709 US

Title: S () Change (X) Addition
Name: WILSON, BRYAN A S
Address: 86 HEDGEWOOD ROAD
City-St-Zip: JASPER, AL 35504 US

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: GEORGE RALPH COLE

P/D

04/29/2005

Electronic Signature of Signing Officer or Director

_____ Date