

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000001712

FILED  
Jan 05, 2012  
Secretary of State

Entity Name: CORSICANA BEDDING, INC.

## Current Principal Place of Business:

2700 E HWY 31  
CORSICANA, TX 75110

## New Principal Place of Business:

3001 S HWY 287  
CORSICANA, TX 75109

## Current Mailing Address:

PO BOX 1050  
CORSICANA, TX 75151

## New Mailing Address:

FEI Number: 75-1372613      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

COBB, KIM  
450 POLK STREET  
BARTOW, FL 338303749 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

## OFFICERS AND DIRECTORS:

Title: CEO  
Name: MORAN, CARROLL  
Address: PO BOX 1050  
City-St-Zip: CORSICANA, TX 75151

Title: V  
Name: WRIGHT, JAMES  
Address: PO BOX 1050  
City-St-Zip: CORSICANA, TX 75151

Title: P  
Name: GRANT, CHAD  
Address: PO BOX 1050  
City-St-Zip: CORSICANA, TX 75151

Title: V  
Name: COBB, KIM  
Address: PO BOX 1050  
City-St-Zip: CORSICANA, TX 75151

Title: ST  
Name: MORAN, GAIL  
Address: PO BOX 1050  
City-St-Zip: CORSICANA, TX 75151

I hereby 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 all other like empowered.

SIGNATURE: MIKE MCWHERTER

CPA

01/05/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date