

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000099763

**Entity Name:** OFFICE FURNITURE PLACE, INC.

**Current Principal Place of Business:**

1939 BLANDING BOULEVARD  
JACKSONVILLE, FL 32210

**Current Mailing Address:**

1939 BLANDING BOULEVARD  
JACKSONVILLE, FL 32210

**FEI Number:** 59-3711207

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

ROBINSON, CHARLES C  
1939 BLANDING BOULEVARD  
JACKSONVILLE, FL 32210 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

**Officer/Director Detail :**

Title	DIRE	Title	OFFI
Name	ROBINSON, CHARLES C	Name	ROBINSON, AMARILIS A
Address	1939 BLANDING BOULEVARD	Address	1939 BLANDING BOULEVARD
City-State-Zip:	JACKSONVILLE FL 32210	City-State-Zip:	JACKSONVILLE FL 32210

*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:** AMARILIS A. ROBINSON

**OFFICE**

**03/15/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date