

**2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P40546

**FILED**  
**Jan 17, 2020**  
**Secretary of State**  
**1192556479CC**

**Entity Name:** ASHLEY FURNITURE INDUSTRIES, INC.

**Current Principal Place of Business:**

ONE ASHLEY WAY  
ARCADIA, WI 54612

**Current Mailing Address:**

ONE ASHLEY WAY  
ARCADIA, WI 54612

**FEI Number:** 39-1141201

**Certificate of Status Desired:** No

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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           DIRECTOR, CHAIRMAN  
Name           WANEK, RONALD G.  
Address        1205 SNELL BLVD NE  
City-State-Zip: SAINT PETERSBURG FL 33704

Title           SECRETARY  
Name           WAGNER, SHARI  
Address        ONE ASHLEY WAY  
City-State-Zip: ARCADIA WI 54612

Title           PRESIDENT, DIRECTOR  
Name           WANEK, TODD R  
Address        1427 OCEANVIEW DRIVE  
City-State-Zip: TIERRA VERDE FL 33715

Title           TREASURER  
Name           MULLER, TROY  
Address        ONE ASHLEY WAY  
City-State-Zip: ARCADIA WI 54612

*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:** TROY MULLER

**TREASURER**

**01/17/2020**

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

\_\_\_\_\_  
Date