

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

FILED

Mar 14 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 132374 (0)
1. Corporation Name
CLARK'S FURNITURE-CARPETING, INC.

Principal Place of Business
111 W. GEORGIA AVENUE
DELAND FL 32720
US

Mailing Address
111 W. GEORGIA AVENUE
DELAND FL 32720-5406
US



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 05/12/1936	3a. Date of Last Report 01/24/1996
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.			4. FEI Number 59-0424697	Applied For Not Applicable
22 City & State	27 City & State			5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23 Zip	28 Zip	Country	Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	25	29	30	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

CLARK, GEORGE
111 W. GEORGIA AVENUE
DELAND FL 32720

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VST	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CLARK, BLANCHE	1.2 NAME	
STREET ADDRESS	111 W. GEORGIA AVENUE	1.3 STREET ADDRESS	
CITY-ST-ZIP	DELAND, FL 00000	1.4 CITY-ST-ZIP	
TITLE	PD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CLARK, GEORGE	2.2 NAME	
STREET ADDRESS	111 W. GEORGIA AVENUE	2.3 STREET ADDRESS	
CITY-ST-ZIP	DELAND, FL 00000	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JOHNSON, MARY T.	3.2 NAME	
STREET ADDRESS	408 S ORANGE ST	3.3 STREET ADDRESS	
CITY-ST-ZIP	NEW SMYRNA BCH FL	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for 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 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:  GEORGE CLARK 3/11/97 (904)734-6164

SR2E034 (9/96)