2004 FOR PROFIT CORPORATION ANNUAL REPORT **DOCUMENT # 234370** STANTON CHURCH FURNITURE COMPANY

FILED Apr 22, 2004 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

DO NOT WRITE IN THIS SPACE

73 STANTON DRIVE HWY 77 NORTH CHIPLEY, FL 32428 US

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03022004

No Chg-P

CR2E034 (10/03)

4. FEI Number 59-0933170

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

STANTON, SAM B. 73 STANTON DRIVE HWY 77 NORTH CHIPLEY, FL 32428			DO NOT WRITE IN THIS SPACE		
8. The above the obligat	named entity submits this statement for the plions of registered agent.	urpose of changing its register	i ed office or r	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE Signature, typed or privated rame of registered agent and title if applicable. (NOTE Registered			d Agent signature required when reinstating) DATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.			1100000024078 04/22/04-80030-008 150.00
10.	OFFICERS AND DIREC	TORS			
THEE NAME STREET ADDRESS CULY ST-ZIP	P STANTON, SAM B. 73 STANTON DR HWY 77 N CHIPLEY, FL				
TITLE MAME STREET ADDRESS CITY-ST-EP	V STANTON, KENNETH 73 STANTON DR HWT 77 NORTH CHIPLEY, FL				
RITE NAME STREET ADDRESS CITY-ST-ZIP	ST STANTON, DOROTHY A. 73 STANTON DRIVE HWY 77 NORTH CHIPLEY, FL	i -		DO NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST ZIP			IN THIS SPACE		
NAME SIREEI ADDRESS CSTY - SI - ZIP					
TIFLE MAARE STRILET ADDRESS CITY ST &P					
 I hereby a indicated 	certily that the information supplied with this fill ton this report or supplemental report is true a	ling does not qualify for the exe and accurate and that my signa	mption state ture shall ha	d in Section 119.07(3) ve the same legal effe	(f), Florida Statutes, I further certify that the information of as if made under oath; that I am an officer or director

mulcated on this report of supplemental report is true and accurate and trial my signature shall have the same legal effect as if made under dath; that it am an officer or diffector 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: