**FILED** 

Mar 26, 1999 8:00 am Secretary of State

03-26-1999 90003 022 \*\*\*150.00

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

**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # 321376

1. Corporation Name

BRADLE	y's Chairs and Sofas, I	NCORPORATED				
Principal Place	e of Business	Mailing Address			A SOUTH FEBRUS 1800 TABLE STATE TO BE STATE OF THE STATE	Bibli Bibli Bibli Bibli Bibli bibli atbit inbi
13055 STARKEY ROAD LARGO FL 34643  13055 STARKEY ROAD LARGO FL 34643					DO NOT WRITE IN	THIS SPACE
					3. Date Incorporated or Qualifed	
					09/27/1967	
2 Bringing P	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
	iace of ousiness	26			59-1204543	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat		- City & State	- ,:	<del></del>	6. Election Campaign Financing	\$5.00 May Be
23 28					Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Count	ry	8. This corporation owes the current ye	ear Intangible
24 3311	3 [25]	29 ,33113	30		Personal Property Tax.	Yes No
	9. Name and Address of Curren				10. Name and Address of New Regis	tered Agent
			8	1 Name		
Bradley Jr, Paul A.			1.5	2 Street Ad	idress (P.O. Box Number is Not Acceptable)	
13055 STARKEY RD					,	
LAR	GO FL 33540		8	3		
			-	4 City		= 85 Zip Code
			Ì			FL   1.3311.3_
office or r	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was :	authorized t	y the corpora	orporation submits this statement for the purp- ation's board of directors. I hereby accept the	ose of changing its registered appointment as registered
SIGNATURE						
Signature, typed or printed name of registered agent and title if applicable. (NOTE: R				jent signature requ	and mich femerality	ATÉ
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE	
TITLE	PD	☐ DELETE	1.1 TITL			☐ Change ☐ Addition
NAME	BRADLEY, PAUL A JR		1.2 NAM	E ,		
STREET ADDRESS	1480 GULF BLVD		1.3 STR	ET ADDRESS		
CITY-ST-ZIP	BELLEAIR SHORE FL		1.4 CITY	-ST-ZIP		CT Ob a series of the series o
TITLE	STD	☐ DELETE	2.1 TITLE			☐ Change ☐ Addition
NAME	BRADLEY, MICHAEL P		2.2 NAM	E		
STREET ADDRESS	3998 HAMMOND'S FERRY		2,3 STR	ET ADDRESS		
CfTY-ST-ZIP	EVANS GA			'- ST- ZIP		Change Addition
mæ~	<del>-</del> -	→ □ DELETE	7 3,1 πτ.	- 1		☐ change ☐ Addition
NAME			3.2 NAM	E		
STREET ADDRESS			3,3 STR	ET ADDRESS		
CITY-ST-ZIP				-ST-ZIP		Change Addition
TITLE	İ	☐ DELETE	4,1 TITU			☐ Change ☐ Addition
NAME			4, 2 NA			
STREET ADDRESS			4,3 STR	EET ADORESS		
CITY-ST-ZIP		<u> </u>		-ST-ZIP		Change D Addition
TITLE	·	☐ DELETE	5.1 TITL			☐ Change ☐ Addition
NAME			5.2 NAM			
STREET ADDRESS				EET ADDRESS		
CITY-ST-ZIP				-ST-ZIP	<u> </u>	Change Addition
TITLE		☐ DELETE	6.1 TITL	i i		
NAME	1		6.2 NAM	t		

14. I 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, with all other like empowered.

63 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS