

**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 04, 2005 08:00 A**  
**Secretary of State**

**DOCUMENT # 429222**

1. Entity Name  
ROWLAND'S UPHOLSTERY & DECORATING, INC.



Principal Place of Business  
1562 SAN MARCO BLVD  
JACKSONVILLE, FL 32207

Mailing Address  
1562 SAN MARCO BLVD  
JACKSONVILLE, FL 32207



01142005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
59-1466944

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

**6. Name and Address of Current Registered Agent**

GELMAN, STANLEY B.  
213 WASHINGTON STREET  
JACKSONVILLE, FL 32202

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent

SIGNATURE \_\_\_\_\_  
Signature: Typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE V  
NAME ROWLAND, ANN  
STREET ADDRESS 1562 SAN MARCO BLVD  
CITY - ST - ZIP JACKSONVILLE, FL 00000.

TITLE P  
NAME ROWLAND, DEXTER  
STREET ADDRESS 1562 SAN MARCO BLVD  
CITY - ST - ZIP JACKSONVILLE, FL 00000.

TITLE  
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02/04/05-80041-022 150.00

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12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Dexter Rowland Dexter Rowland 1/26/05 (904) 398-1653  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #