

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 442285

FILED
Mar 14, 2011
Secretary of State

Entity Name: MASTERCRAFT SLEEP PRODUCTS, INC.

Current Principal Place of Business:

2939 W. BEAVER ST.
JACKSONVILLE, FL 32254

New Principal Place of Business:

Current Mailing Address:

2939 W. BEAVER ST.
JACKSONVILLE, FL 32254

New Mailing Address:

FEI Number: 59-1508624

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRAVIS, (MILTON D.)
2939 W. BEAVER ST.
JACKSONVILLE, FL US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD
Name: TRAVIS, (MILTON D.)
Address: 750 TARA FARMS ROAD
City-St-Zip: DOCTORS INLET, FL 32068

Title: VTD
Name: TRAVIS, BELVA
Address: 750 TARA FARM"S
City-St-Zip: DOCTORS INLET, FL 32068

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: MILTON D TRAVIS

P

03/14/2011

Electronic Signature of Signing Officer or Director

Date