

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006 8:00 am
Secretary of State

04-24-2006 90363 001 ****61.25

DOCUMENT # 706370 1. Entity Name FLORIDA HOME FURNISHINGS ASSOCIATION, INC.			
Principal Place of Business PO BOX 1240 HIGH POINT, NC 27261 US		Mailing Address 999 DOUGLAS AVE STE 2221 ALTAMONTE SPRINGS, FL 32714 US	
2. Principal Place of Business 3910 TINSLEY DR Suite, Apt. #, etc. SUITE 105		3. Mailing Address 1330 S. MISSOURI Suite, Apt. #, etc. 	
City & State HIGH POINT		City & State CLEARWATER, FL	
Zip 27265		Zip 33756	
Country US		Country US	
4. FEI Number 23-7000294		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent PHILLIPPS, JENNIFER 999 DOUGLAS AVE, SUITE 2221 ALTAMONTE SPRINGS, FL 32714		7. Name and Address of New Registered Agent Name RICHARD D. HARRISON Street Address (P.O. Box Number is Not Acceptable) 1330 S. MISSOURI AVE. City CLEARWATER FL Zip Code 33756	
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 <u><i>Richard D. Harrison</i></u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	
\$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE PD NAME BAYNE, RICHARD MR. STREET ADDRESS 3500 45TH STREET CITY-ST-ZIP WEST PALM BEACH, FL 334071899	<input checked="" type="checkbox"/> Delete	TITLE PDT NAME RICHARD D. HARRISON STREET ADDRESS 1330 S. MISSOURI AVE CITY-ST-ZIP CLEARWATER FL 33756	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE VPD NAME HARRISON, RICHARD D MR. STREET ADDRESS 1330 S. MISSOURI AVENUE CITY-ST-ZIP CLEARWATER, FL 337563530	<input checked="" type="checkbox"/> Delete	TITLE UPD NAME DAVID GONYEA STREET ADDRESS P.O. BOX 497 CITY-ST-ZIP MULBERRY FL 33860	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE VPD NAME GONYEA, DAVE MR. STREET ADDRESS PO BOX 497 CITY-ST-ZIP MULBERRY, FL 338600497	<input checked="" type="checkbox"/> Delete	TITLE J NAME JERRY BAER STREET ADDRESS 1589 N.W. 12 AVENUE CITY-ST-ZIP FORT LAUDERDALE FL 33306	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE VPD NAME CLEVELAND, CRAIG MR. STREET ADDRESS 7350 TALONA DRIVE, SUITE E CITY-ST-ZIP WEST MELBOURNE, FL 329041602	<input checked="" type="checkbox"/> Delete	TITLE J NAME ALICE ANN BAYNE STREET ADDRESS 3500 46TH ST CITY-ST-ZIP W. PALM BEACH FL 33407	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE S NAME TURNER, LISA MS. STREET ADDRESS 2900 US 27 SOUTH CITY-ST-ZIP AVON PARK, FL 338259759	<input type="checkbox"/> Delete	TITLE J NAME PEDRO CAPO STREET ADDRESS 4700 NW 16TH ST. CITY-ST-ZIP MIAMI GARDENS FL 33054	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 617, 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: <u><i>Richard D. Harrison</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date <u>4-10-06</u> Days/Phone # <u>727/446-5947</u>	