


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 06, 2008 08:00 AM
Secretary of State

DOCUMENT # F0000003674 1. Entity Name FURNITURE REPRESENTATIVES, INC.	
-----------------------------------------------------------------------------	-----------------------------------------------------------------------------------

Principal Place of Business 811 N.E. 77TH STREET BOCA RATON, FL 33487	Mailing Address 811 N.E. 77TH STREET BOCA RATON, FL 33487
-----------------------------------------------------------------------------	-----------------------------------------------------------------

DO NOT WRITE IN THIS SPACE



01172008 No Chg-NP CR2E037 (4/06)

4. FEI Number 23-7435037	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ANNUNZIATA, LEE
 811 N.E. 77TH STREET
 BOCA RATON, FL 33487

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

Filing Fee is \$81.25
Due by May 1, 2008

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CP PARISI, BRUCE 350 CANTERBURY COURT ALAMO, CA 94507
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCV ANNUNZIATA, JIM 811 N.E. 77TH STREET BOCA RATON, FL 33487
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BACIK, ANDREW 9819 EAST TOPAZ DRIVE SCOTTSDALE, AZ 85258
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT/S ANNUNZIATA, LEE 811 N.E. 77TH STREET BOCA RATON, FL 33487
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000818068
 02/15/08-80028-015 61.25

DO NOT WRITE IN THIS SPACE

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: Lee Annunziata 2/1/08 561-241-8797
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #