


2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 02, 2004 8:00 am
Secretary of State

04-02-2004 90031 034 ***150.00

DOCUMENT # F00000006259					
1. Entity Name FURNITURE FACTORS, INC.					
Principal Place of Business 124 S. THOMAS ST., STE D TUPELO MS 38801			Mailing Address PO BOX 2084 TUPELO MS 38803-2084		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 64-0757414	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent WILSON, PAUL A 4300 BAYOU BLVD., STE 13 PENSACOLA FL 32503				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Make Check Payable to Florida Department of State			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCD ROBBINS, KEN 124 S. THOMAS ST., STE D TUPELO MS	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	See Attached List Board of Directors	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BUTLER, JUDY 124 S. THOMAS ST., STE D TUPELO MS	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BREVARD, HENRY PO BOX 407 TUPELO MS	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BURRUS, SWAN 2509 LAKESHIRE DR. TUPELO MS	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BREVARD, HENRY P.O. BOX 407 TUPELO MS 38802	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PAGE, FRED 5221-A CLIFF GOOKIN BLVD TUPELO MS	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	

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:  **Joseph K Robbins** 03-30-04 662-680-4600
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Attachment # 70000006259
44023867

FURNITURE FACTORS, INC.
Board of Directors

Henry Brevard
P.O. Box 407
Tupelo, MS 38802

Walter Hillen
913 Blackjack Road
Starkville, MS 39759

Dr. Swan Burrus
2509 Lakeshire Drive
Tupelo, MS 38804

Bobby Dodge
P.O. Box 1688
Tupelo, MS 38802

Henry Dodge
P.O. Box 1688
Tupelo, MS 38802

Tom Faust
1218 Robin Cove
Tupelo, MS 38801

L.E. Gibens
P.O. Box 1010
Tupelo, MS 38802

Jimmy Green
P. O. Box 153
Tupelo, MS 38302

Fred Page
5221-A Cliff Gookin Blvd
Tupelo, MS 38801

Stuart Vance
P. O. Box 733
Starkville, MS 39759

OFFICERS

PRESIDENT
Joseph K. (Ken) Robbins
P. O. Box 2084
Tupelo, MS 38803

SECRETARY
Judy L. Butler
P. O. Box 2084
Tupelo, MS 38803