

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F02000004252

FILED
Oct 10, 2005
Secretary of State

Entity Name: NATIONWIDE FURNITURE, INC.

Current Principal Place of Business:

6420 ATLANTIC BLVD., #1300
NORCROSS, GA 30071

New Principal Place of Business:

Current Mailing Address:

6420 ATLANTIC BLVD., #1300
NORCROSS, GA 30071

New Mailing Address:

FEI Number: 03-0440703

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: PETER LIMERI

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PCEO () Delete
Name: MEISER, FREDERICK E
Address: 6420 ATLANTIC BLVD., #130
City-St-Zip: NORCROSS, GA 30071

Title: SCFO () Delete
Name: BUCHANAN, J. MORRIS
Address: 6420 ATLANTIC BLVD., #130
City-St-Zip: NORCROSS, GA 30071

Title: V () Delete
Name: LEDER, MARC J
Address: 6420 ATLANTIC BLVD., #130
City-St-Zip: NORCROSS, GA 30071

Title: V () Delete
Name: KROUSE, RODGER R
Address: 6420 ATLANTIC BLVD., #130
City-St-Zip: NORCROSS, GA 30071

Title: V () Delete
Name: NEIMARK, JASON H
Address: 6420 ATLANTIC BLVD., #130
City-St-Zip: NORCROSS, GA 30071

Title: V () Delete
Name: CALHOUN, KEVIN J
Address: 6420 ATLANTIC BLVD., #130
City-St-Zip: NORCROSS, GA 30071

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCEO (X) Change () Addition
Name: GLUCKSMAN, STEVE
Address: 6420 ATLANTIC BLVD., #130
City-St-Zip: NORCROSS, GA 30071

Title: SCFO (X) Change () Addition
Name: LIMERI, PETER
Address: 6420 ATLANTIC BLVD., #130
City-St-Zip: NORCROSS, GA 30071

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change () Addition
Name: KREILIEN, DAVE
Address: 6420 ATLANTIC BLVD., #130
City-St-Zip: NORCROSS, GA 30071

Title: V (X) Change () Addition
Name: KING, SCOTT
Address: 6420 ATLANTIC BLVD., #130
City-St-Zip: NORCROSS, GA 30071

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: PETER LIMERI

Electronic Signature of Signing Officer or Director

CFO

10/10/2005

Date