2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000002379

FILED Jan 06, 2008 Secretary of State

Entity Name: FUTON ASSOCIATION OF NORTH AMERICA, INC.

ourrent P	rincipal Plac	e of Business:	New Prince	ipal Place of Business:
	OCKET BOU D, FL 32824	LEVARD		
Current N	lailing Addre	ess:	New Maili	ng Address:
	OCKET BOU D, FL 32824	LEVARD		
FEI Number	: 04-2888066	FEI Number Applied For ()	FEI Number Not App	licable () Certificate of Status Desired ()
Name and	l Address of	Current Registered Agent:	Name and	Address of New Registered Agent:
), SUSAN OCKET BOU), FL 32824	LEVARD US		
	e named entity e of Florida.	submits this statement for the	purpose of changing	ts registered office or registered agent, or both,
SIGNATUI	RE:			
SIGNATUI		onic Signature of Registered A	gent	Date
SIGNATUI Officer :			_	Date IS/CHANGES TO OFFICERS AND DIRECTOR
	Electron S AND DIRECT P (TEDESCO, S	CTORS:) Delete USAN ET BLVD, SUITE 107	_	
OFFICER: Title: Vame: Address: City-St-Zip: Title: Vame: Address:	Electrons S AND DIRE P (TEDESCO, SI 10705 ROCK ORLANDO, F	CTORS:) Delete USAN ET BLVD, SUITE 107 L 32824) Delete CASEY DR.	ADDITION Title: Name: Address:	IS/CHANGES TO OFFICERS AND DIRECTO
OFFICER: Title: Name: Address:	Electrons S AND DIRE P (TEDESCO, S 10705 ROCK ORLANDO, F V (DAY, KAREN 80 JAMES E. BUFFALO, N	CTORS:) Delete USAN ET BLVD, SUITE 107 L 32824) Delete CASEY DR. (142062367) Delete PATTIE ST	ADDITION Title: Name: Address: City-St-Zip: Title: Name: Address:	() Change () Addition () Change () Addition () Change () Addition S (X) Change () Addition ERDMAN, TOM 1750 N. 25TH AVENUE
OFFICER: Name: Address: City-St-Zip: Fitle: Name: Address: City-St-Zip: Fitle: Name: Address: Address:	Electrons S AND DIRE P (TEDESCO, SI 10705 ROCK ORLANDO, F V (DAY, KAREN 80 JAMES E. BUFFALO, NY S (MACMILLEN, 77 WEAVER FALL RIVER, T (ARNOVITZ, R	CTORS:) Delete USAN ET BLVD, SUITE 107 L 32824) Delete CASEY DR. / 142062367) Delete PATTIE ST MA 02720) Delete ICHARD MANTOWN PKWY	ADDITION Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address:	() Change () Addition () Change () Addition () Change () Addition S (X) Change () Addition ERDMAN, TOM 1750 N. 25TH AVENUE

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SUSAN TEDESCO P 01/06/2008