

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Matheson
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **F79585** (8)

1. Corporation Name

DESIGNER FURNITURE BY HAUPTNER INC



Principal Place of Business

**1142-B 53RD CT. N.
WEST PALM BEACH FL 33407**

Mailing Address

**1142-B 53RD CT. N.
WEST PALM BEACH FL 33407**

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

**HAUPTNER, BONNIE
8092 NASHUA DRIVE
PALM BEACH GARDENS FL 33418**

3. Date Incorporated or Qualified
05/03/1982

3a. Date of Last Report
04/19/1995

4. FEI Number

59-2189628

Applied For
Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐ **\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1503, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's Board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of Registered Agent (if not the same as above)

Signature of Registered Agent (if not the same as above)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
PD HAUPTNER, MARK
STREET ADDRESS
8092 NASHUA DRIVE
CITY-ST-ZIP
PALM BEACH GRDNS FL

TITLE ☐ DELETE

NAME
STD HAUPTNER, BONNIE
STREET ADDRESS
8092 NASHUA DRIVE
CITY-ST-ZIP
PALM BEACH GRDNS FL

TITLE ☐ DELETE

NAME
HAUPTNER, BONNIE
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TITLE ☐ DELETE

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/95

Designated Agent

CR2E034 (12/95)