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FILED  
Apr 23 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # F97000004754 (4)

1. Corporation Name

RESTORATION HARDWARE, INC.

Principal Place of Business

15 KOCH RD., STE. J  
CORTE MADERA CA 94925

Mailing Address

15 KOCH RD., STE. J  
CORTE MADERA CA 94925

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/11/1997

4. FEI Number

68-0140361

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☐

Yes

☐

No

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

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 607.1508, 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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME CP  
GORDON, STEPHEN  
STREET ADDRESS 15 KOCH RD., STE. J  
CITY-ST-ZIP CORTE MADERA CA 94925

TITLE ☐ DELETE

NAME SCOO  
CHRISTOPHER, THOMAS  
STREET ADDRESS 15 KOCH RD., STE. J  
CITY-ST-ZIP CORTE MADERA CA 94925

TITLE ☐ DELETE

NAME TCFO  
LOW, THOMAS  
STREET ADDRESS 15 KOCH RD., STE. J  
CITY-ST-ZIP CORTE MADERA CA 94925

TITLE ☐ DELETE

NAME D  
CAMP, ROBERT  
STREET ADDRESS RR 1, BOX 202  
CITY-ST-ZIP NORTH HERO VT 05474

TITLE ☐ DELETE

NAME D  
HEMMIG, RAYMOND  
STREET ADDRESS 1231 GREENWAY DR., STE. 800  
CITY-ST-ZIP IRVING TX 75038

TITLE ☐ DELETE

NAME D  
LAZARUS, MICHAEL  
STREET ADDRESS 343 SANSOME ST., STE. 1210  
CITY-ST-ZIP SAN FRANCISCO CA 94104

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 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]*

1/17/98

415 926 1905

CR2E034 (10/97)