2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # K60903 FILED Feb 01, 2008 08:00 AM Secretary of State GOUSE'S FINE FURNITURE, INC. Principal Place of Business Mailing Address C/O WARREN T. GOUSE 24081 U.S. 41 24081 US 41 BONITA SPRINGS, FL 33923 US BONITA SPRINGS, FL 34134 01282008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0110767 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GOUSE, WARREN T DO NOT WRITE 8075 LAGOON RD. BONITA SPRINGS, FL 34134 IN THIS SPACE 8. The above named ontity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Lam familiar with, and accept the obligations of registered agent. Signature, lyped or printed name of redistered arrent and rife if applicable (NOTE: Registered Agent signature required when reinstating DATE 9. Election Campaign Financing \$5.00 May Be FILE NOWILL FEE IS \$150.00 \Box After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE GOUSE, WARREN T. NAME STREET ADDRESS 8075 LAGOON RD CITY-ST-709 FORT MYERS BEACH, FL 33931 U00000811058 TITLE 02/11/08-80011-012 150.00 GOUSE, MARIAN T. STREET ADDRESS 161 ESTRELLITA DRIVE FORT MYERS BEACH, FL 33931 CITY-ST-ZIP TITLE NAME YOUNG, JEFFREY STREET ADDRESS 8075 LAGOON RD DO NOT WRITE CITY-ST-71P FORT MYERS BEACH, FL 33931 TILLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I horeby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under oath; that if 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: I arian T. Jon

NAME STREET ADDRESS CITY-ST-ZIP

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1-29-08 (239)947-6008