


**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 23, 2004 08:00 AM
Secretary of State

DOCUMENT # L01000006309 1. Entity Name THE FURNITURE GALLERY, LLC	
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Principal Place of Business 2623 ENTERPRISES RD ORANGE CITY, FL 32763	Mailing Address 3042 US HWY 1 EDGEWATER, FL 32141
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DO NOT WRITE IN THIS SPACE



02162004 No Chg-LLC CR2E083 (10/03)

4. FEI Number 59-3717007	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent BRINSON, PATRICIA 3042 US HWY 1 EDGEWATER, FL 32141

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____
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Filing Fee is \$50.00 Due by May 1, 2004

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BRINSON, PATRICIA A 120 FLAMINGO ROAD EDGEWATER, FL
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<p>U00000060727 02/23/04-80050-022 50.00</p> DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: <i>William S Brinson</i> WILLIAM S BRINSON SEC. 2-19-04 386-423-2379		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>	<small>Date</small>	<small>Daytime Phone</small>