2007 LIMITED LIABILITY COMPANY

May 03, 2007 08:00 A Secretary of State **ANNUAL REPORT** DOCUMENT # L0100006309 THE FURNITURE GALLERY, LLC Principal Place of Business Mailing Address 2623 ENTERPRISES RD 3042 US HWY 1 ORANGE CITY, FL 32763 EDGEWATER, FL 32141 04302007 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3717007 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent **BRINSON, PATRICIA** DO NOT WRITE 3042 US HWY 1 EDGEWATER, FL 32141 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature regulard when reinstating) U00000760078 Filing Fee is \$50.00 Due by May 1, 2007 05/24/07-80068-009 50.00 9. MANAGING MEMBERS/MANAGERS MGRM TITLE BRINSON, PATRICIA A NAME 120 FLAMINGO ROAD STREET ADDRESS CITY-ST-ZIP EDGEWATER, FL TITLE STREET ADDRESS CITY-ST-ZIP TITI F NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

11. I hereby 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 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.

SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

CITY-ST-ZIP TITLE

STREET ADDRESS CITY-ST-ZIP

FILED