

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000019223

FILED
Feb 23, 2006
Secretary of State

Entity Name: FLORIDA HOME FURNISHING SALES GROUP, LLC

Current Principal Place of Business:

4447 MCINTOSH LAKE AVENUE
SARASOTA, FL 34233 US

New Principal Place of Business:

Current Mailing Address:

4447 MCINTOSH LAKE AVENUE
SARASOTA, FL 34233 US

New Mailing Address:

FEI Number: 20-0901008

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BETTERTON, GREG A
981 RIDGEWOOD AVENUE
SUITE 101
VENICE, FL 34285 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: DCC SALES, INC.,
Address: 4447 MCINTOSH LAKE AVENUE
City-St-Zip: SARASOTA, FL 32333 US

Title: MGRM () Delete
Name: E.B. LUPTON, INC.,
Address: 809 SW 121ST STREET AVENUE
City-St-Zip: PEMBROKE PINES, FL 33025 US

Title: MGRM (X) Delete
Name: BIRDS OF A FEATHER., INC.
Address: 4282 SWEETMEADOW CIRCLE
City-St-Zip: SARASOTA, FL 34238 US

Title: MGRM () Delete
Name: JIM BURKE SALES & DI, STRIBUTORS, IN C .
Address: 6490 LAS FLORES DRIVE
City-St-Zip: BOCA RATON, FL 33433 US

Title: MGRM () Delete
Name: JIM GALUP ENTERPRISE, S, INC.
Address: 2020 ALTA MEADOWS LANE #1610
City-St-Zip: DELRAY BEACH, FL 33444 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: E.B. LUPTON, INC.,
Address: 11581 S.W. 12TH STREET
City-St-Zip: PEMBROKE PINES, FL 33025 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: JIM GALUP ENTERPRISE, S, INC.
Address: 317 WEST MALLORY CIRCLE
City-St-Zip: DELRAY BEACH, FL 33483 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: DOUGLAS C. COMBS

MGRM

02/23/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date