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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L37058

ALLEN BOONE'S UPHOLSTERY, INC.

| | | | | | | -{ | B. I I B I I W I B I I B I B I I | ALI BIBIL BIBIL B | , 8) 8 8 8 8 8 8 8 8 8 |
|---|--|-----------------------------------|---|--|--|--|----------------------------------|----------------------------|--|
| Principal Place | e of Business | Mailing Address | | | | , , <u> </u> | | | |
| % CLAY B. TOL | usey jr | % CLAY B. TOUSEY JR | | | | | | | |
| 604 N. 3RD STREET 604 N. 3RD STREET | | | | | | DO NOT WRITE IN THE SPACE | | | |
| JACKSONVILLE BEACH FL 32250 JACKSONVILLE BEACH | | | . 32250 | | | DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed | | | |
| | | | | | | · | | | |
| | | | | | | 01/01/1990 | | | |
| 2. Principal Pl | lace of Business | 2a. Mailing Address | | | | 4. FEI Number | | <u> </u> | plied For |
| 21 | | 26 | | | | 59-2980853 | | | t Applicable |
| Suite, Apt. | #, etc. | Suite, Apt. #, etc. | | | | 5. Certificate of Status Desired | | \$8.75 A | |
| 22 | | 27 | | | | J. Gorinadio of citato 2 con co | | Fee Re | quired |
| City & State | e | City & State | | | | 6. Election Campaign Financing | | \$5.00 | May Be |
| 23 | | 28 | | | | Trust Fund Contribution | | Added to | o Fees |
| Zip | Country | Zip | Cou | untry | | 8. This corporation owes the curre | nt year Inta | | ļ |
| 24 | 25 29 30 | | | | | Personal Property Tax. | | Yes | □No |
| | 9. Name and Address of Curre | nt Registered Agent | | | | 10. Name and Address of New R | egistered / | gent | |
| | | | | 81 | Name | | | | |
| TOU | SEY, CLAY B., JR. | | | | | 75 0 5 N 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | hia) | | |
| 1 INDEPENDENT DRIVE | | | | 82 | Street Address (P.O. Box Number is Not Acceptable) | | | | |
| 2600 | | | | 83 | | | | | |
| | KSONVILLE FL 32202 | | | | | | | | |
| UAOI | NOOTHILLE TE OZZUZ | | | 84 | City | | FL | 85 Zip 0 | Code |
| | | | | | | | | 11 - 15 - 16 - | |
| 11. Pursuant | to the provisions of Sections 607.05 | 02 and 607.1508, Florida Statu | ites, the a | above | -named corpo | oration submits this statement for the n's board of directors. I hereby accep | purpose of the appoin | changing its | registered |
| agent. La | m familiar with, and accept the oblig | ations of, Section 607.0505, FI | orida Stat | tutes. | ine corporation | 110 board of an octor of 1 1101227 2002 | | | ´ 1 |
| SIGNATURE | · · · · | | | | | | | | } |
| SIGNATURE | Signature, typed or printed name of registered ag- | ent and title if applicable. (NOT | E: Registered | d Agent | signature required | when reinstating) *** \$15.5 1.5 1.5 | | (6) | |
| 12. | OFFICERS A | ND DIRECTORS | 13. | | | ADDITIONS/CHANGES TO OFF | | | |
| TITLE | TS | ☐ DELETE | 1.1 T | πE | | | , ;' | Change | ☐ Addition |
| NAME | BOONE, ALLEN J., JR. | | 1.2 N | IAMÉ | | | | | |
| STREET ADDRESS | 604 N. 3RD ST. | | 138 | TREET | ADDRESS | | | | |
| | JACKSONVILLE BCH FL | | 140 | TY-ST | -7IP | | | | |
| CITY-ST-ZIP | P | ☐ DELETE | _ | | | | | | |
| | ' | | ■ 21 IV | 171 E | | | | Change | Addition |
| NAME | | | 2.1 TI | | | | ~ . | Change | Addition |
| STREET ADDRESS | BOONE, STEPHEN L. | | 2.2 N | IAME | | and the second s | | Change | Addition |
| | 604 N THIRD ST | | 2.2 N | JAME STREET | ADORESS | | | Change | Addition |
| CITY-ST-ZIP | I | _ | 2.2 N 2.3 S 2.4 C | LAME STREET | | | | | |
| | 604 N THIRD ST | ☐ DELETE | 2.2 N | LAME STREET | | | | ☐ Change | ☐ Addition |
| CITY-ST-ZIP | 604 N THIRD ST JACKSONVILLE FL | _ | 2.2 N 2.3 S 2.4 C | LAME STREET CITY-ST TILE | | | | | |
| CITY-ST-ZIP | 604 N THIRD ST JACKSONVILLE FL T BOONE, ALLEN J., JR. | _ | 2.2 N 2.3 S 2.4 C 3.1 Ti 3.2 N | AME STREET CITY-ST TITLE NAME | | | | | |
| CITY-ST-ZIP TITLE NAME STREET ADDRESS | 604 N THIRD ST JACKSONVILLE FL T BOONE, ALLEN J., JR. 604 N. 3RD ST. | _ | 2.2 N 2.3 S 2.4 C 3.1 Ti 3.2 N 3.3 S | AME STREET CITY-ST TITLE NAME | r-zip Address | | | | |
| CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP | 604 N THIRD ST JACKSONVILLE FL T BOONE, ALLEN J., JR. | _ | 2.2 N 2.3 S 2.4 C 3.1 Ti 3.2 N 3.3 S | IAME STREET CITY-ST TILE IAME STREET CITY-ST | r-zip Address | - | | | |
| CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | 604 N THIRD ST JACKSONVILLE FL T BOONE, ALLEN J., JR. 604 N. 3RD ST. JACKSONVILLE BCH FL V | ☐ DELETE | 2.2 N. 2.3 S 2.4 C 3.1 TI 3.2 N. 3.3 S 3.4 C 4.1 TI | IAME STREET CITY-ST TILE IAME STREET CITY-ST | r-zip Address | - | | ☐ Change | ☐ Addition |
| CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | 604 N THIRD ST JACKSONVILLE FL T BOONE, ALLEN J., JR. 604 N. 3RD ST. JACKSONVILLE BCH FL V BOONE, ERNESTINE L. | ☐ DELETE | 2.2 N. 2.3 S' 2.4 C 3.1 Ti 3.2 N. 3.3 S' 3.4 C 4.1 Ti 4.2 N | CITY-ST TILE CITY-ST TILE CITY-ST TILE NAME | ADDRESS F-ZIP | | | ☐ Change | ☐ Addition |
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| CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | 604 N THIRD ST JACKSONVILLE FL T BOONE, ALLEN J., JR. 604 N. 3RD ST. JACKSONVILLE BCH FL V BOONE, ERNESTINE L. | ☐ DELETE | 22 N. 23 S' 24 C 3.1 TI 32 N. 3.3 S 34. C 4.1 TI 4.2 N. 4.3 S 4.4 C | CITY-ST TILE STREET CITY-ST TILE NAME STREET STREET CITY-ST TILE STREET | ADDRESS 1-ZIP ADDRESS 4-ZIP ADDRESS | | | ☐ Change | ☐ Addition |
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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 of 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, with all other like empowered.

6.3 STREET ADORESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

NAME OF SIGNING OFFICER OR DIRECTOR

FILED

Mar 11, 1999 8:00 am Secretary of State

03-11-1999 90068 045 ***150.00