FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 17 PM 12: 29

DOCUMENT # M73555 (8)

1. Corporation Name
A. & N. FURNITURE, INC.

Principal Place of Business
% JAMES L. REDMAN
301 N. COLLINS ST.
PLANT CITY FL 33566-3315

Mailing Address
% JAMES L. REDMAN
301 N. COLLINS ST.
PLANT CITY FL 33566-3315

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/24/1988
3a. Date of Last Report: 02/17/1994

2. Principal Place of Business (21)
2a. Mailing Address (26)
Suite, Apt. #, etc. (22)
Suite, Apt. #, etc. (27)
City & State (23)
City & State (28)
Zip (24) Country (25)
Zip (29) Country (30)

4. FEI Number: 59-2879738 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
REDMAN, JAMES L.
301 N. COLLINS ST.
PLANT CITY FL

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City — FL — 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	PSD
NAME	HUTCHISON, ESTHER A
STREET ADDRESS	301 S. COLLINS ST.
CITY, ST, ZIP	PLANT CITY FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE		☐ Change ☐ Addition
12 NAME		
13 STREET ADDRESS		
14 CITY, ST, ZIP		
21 TITLE		☐ Change ☐ Addition
22 NAME		
23 STREET ADDRESS		
24 CITY, ST, ZIP		
31 TITLE		☐ Change ☐ Addition
32 NAME		
33 STREET ADDRESS		
34 CITY, ST, ZIP		
41 TITLE		☐ Change ☐ Addition
42 NAME		
43 STREET ADDRESS		
44 CITY, ST, ZIP		
51 TITLE		☐ Change ☐ Addition
52 NAME		
53 STREET ADDRESS		
54 CITY, ST, ZIP		
61 TITLE		☐ Change ☐ Addition
62 NAME		
63 STREET ADDRESS		
64 CITY, ST, ZIP		

14. I hereby certify that the information supplied with this report is accurate, complete and correct, to the best of my knowledge and belief, and that I am a duly authorized officer or director of the corporation named in this report or a duly authorized agent of the corporation named in this report, and that I am familiar with the contents of this report and with the requirements of Section 607.0505 of the Florida Statutes, and that I am aware that the information provided in this report is required by Chapter 607, Florida Statutes, and that my name appears above or below as an officer or director with an address.

SIGNATURE: Esther A. Hutchison 1-11-95 813 752-3011

SIGNATURE AND TYPED OR PRINTED NAME OF HONORARY OFFICER OR DIRECTOR
Esther A. Hutchison Pres.

0207701 CP