## **FILE NOW: FILING FEE IS \$61.25**

## May 21 1997 8:00am NONPROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State 1997 DIVISION OF CORPORATIONS DOCUMENT # N9600000966 (9)

**FILED** 

TION, INC.  Principal Place of Business  Mailing Address  23 WEST UNIVERSITY AVE. AINESVILLE FL 32601  Sal WEST UNIVERSITY AVE. GAINESVILLE FL 32601 5269  3. Date Incorporated or Qualified O2/21/1996  2. Principal Place of Business  To Place of Business  2a. Mailing Address  Date Incorporated or Qualified O2/21/1996  4. FEI Number 77/082 Applied For Not Applicable Suite, Apl. #, etc.  Suite, Apl. #, etc.  Suite, Apl. #, etc.  City & State  City & State  City & State  City & State  Country  Cou	SOUTHEAST UNFINISHED FURNITURE RETAILERS ASSOCIA TION, INC.					
AMESYNLE F1 2801  2. Procipal Place of clusteres  AMESYNLE F1 2801  2. Procipal Place of clusteres  3. Date Incorporated or Cualified  CQ21/1998  3. Date Incorporated or Cualified  CQ21/1998  4. FERTURE 37/08 2  Applied For  No Applied Fo						
AMESYNLE FL 32001  GAINESYNLE FL 3200-400-400-400-400-400-400-400-400-400-	Principal Place of Business Mailing Address				I MONISCH DIE MANN WINK DUNK BORK DI	TICE MOLET MOINT ADDIA LALIA DITTE DICE LARF
2. Principial Place of Missingers.  2. Mailing Address.  2. Mailing Address.  3. Maj 4, etc.  3. Maj 1, etc.  4. Maj 1, etc.  3. Maj 1, etc.  4. Maj 1, etc.  3. Maj 1, etc.  4. Maj 1, etc.						
Source   S					3. Date Incorporated or Qualified 02/21/1996	Sa. Date of Last Report
Section Companies of Status   Section Companies   Section Compan	2. Principal P 21 /60/	lace of Business N. Main ST.	26 1601 N.	Main ST.	4. FEI Number 3371082	Not Applicable
28	22 Gair	resville, Fl.	27 Gaines VI	lle, Fl.	5. Certificate of Status Desired	¥ = 0.0 ± 0.0±0.0000000000000000000000000
Country  29 30 30 30 30 30 30 30 30 30 30 30 30 30		e , -		•		
28	<b>Z</b> ip			Country		7,0000,07,000
JOHN S. NORTON, JR., P.A. 431 NORTH GRANDVIEW AVE., SUITE B DAYTONA BEACH FL 32118  82 Stroot Address (P.O. Box Number is Not Acceptable)  83 STREET ADDRESS CITY 51-7P  11. Pursuant to the provisions of Sections 617,0502 and 617 1508, Fiorida Statules, the above and of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida Such change was suthorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and the provisions of Sections 617,0503, Florida Statules, the appointment as registered agent, or both, in the State of Florida Such change was suthorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and the provisions of sections of 17,0503, Florida Statules.  SIGNAT URIE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  16. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	24 324	204 25 USH		30 //5//	Florida Statutes	Yes No
JOHN S. NORTON, JR., P.A. 431 NORTH GRANDVEW AVE., SUITE B DAYTONA BEACH FL 32118  BB City  FL BB Zip Code  T1. Fursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am arminative vivi. and accept the obligations of, Section 617,0503, Provide Statutes.  SIGNATURE  Signature species of princed septiment like if accidente Provisions of 7,0503, Provided Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS 1 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TILE  D D D DELETE  11 TITLE  D D D DELETE  12 TITLE  D NAME  NAME  NAME  NAME  NORDIN, RALPH  22 NAME  13 TITLE  D NORDIN, RALPH  22 NAME  14 STRETA NORSS  23 VEST UNIVERSITY AVE.  21 STRETA NORSS  23 VEST UNIVERSITY AVE.  24 CITY-S1-7P  10 DELETE  31 TITLE  D NORDIN, RALPH  22 NAME  32 STRETA NORSS  23 VEST UNIVERSITY AVE.  43 TITLE  D NORDIN, RALPH  23 NAME  33 STRETA NORSS  CITY-S1-7P  10 DELETE  31 TITLE  D Change Addition  Addition  Addition  Addition  Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  13 TITLE  D Change Addition  Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  13 TITLE  D Change Addition  Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14 TITLE  D Change Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  15 TITLE  D Change Addition  Addition  ADDITIONS/CHANGES CONTINUES  Change Addition  Addition  ADDITIONS/CHANGES CONTINUES  Change Addition  Addition  Addition  ADDITIONS/CHANGES CONTINUES  Change Addition  Addition  Addition  Addition  ADDITIONS/CHANGES CONTINUES  Change Addition  Addition  Change Addition  Addition  Addition  ADDITIONS/CHANGES  CONTINUES  Change Addition  Addition  Change Addition  Change Addition  Addition  Change Addition  Addition  Change Addition  Addition  Change Additi		9./Name and Address of Curren	t Registered Agent	B1 Name	10. Name and Address of New He	gistered Agent
AST NORTH GRANDVEW AVE., SUITE B DAYTONA BEACH FL 32118  BA City  FL BS ZIP Code  II. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes. The above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of Section 617,0503, Priorida Statutes.  SIGNATURE  Signature speaked primary and accept the obligations of Section 617,0503, Priorida Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  11. TITLE  D D DELETE  21. TITLE  D Change Addition  Addition  Addition  Addition  NAME  NORDN, RALPH  22. NAME  32. STREET ADDRESS  CITY-51-7P  TITLE  D D DELETE  3. TITLE  D Change Addition	JOHN A MARKON ID DA					
DAYTONA BEACH FL 32118					ress (P.O. Box Number is Not Acceptat	ole) .
11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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 and accept the odification of 75,0505, Princida Statutes.    Signature   Si				83		
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617.0502, Florida Statutes.  SIGNATURE  Signature types or private face of product serve of registered agent is an familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  Signature types or private face of product serve of registered agent is an familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.  In the signature registered agent is an familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  Signature types or private face of registered agent a	<del>-</del>			84 City		85 Zip Code
SIGNATURE     SIGNATURE   SI	<b>.</b>			1-1		FL
SIGNATURE     SIGNATURE   SI	11. Pursuant office or r	to the provisions of Sections 617.050 registered agent, or both, in the State	2 and 617 1508, Florida Statute of Florida. Such change was a	es, the above-named corp authorized by the corpora	poration submits this statement for the pation's board of directors. I hereby acce	purpose of changing its registered pt the appointment as registered
12		m familiar with, and accept the obliga-	ations of, Section 617.0503, Flo	rida Statutes.		,
13.   ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	SIGNATURE	Signature typed or printed name of registered age	nt and title if applicable (NOTE	: Registered Agent signature requi	red when reinstating)	DATE
NAME   STREET ADDRESS   12 NAME   13 STREET ADDRESS   13 STREET ADDRESS   13 STREET ADDRESS   14 CITY-ST-ZIP	12.	OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS IN 12
STREET ADDRESS   523 WEST UNIVERSITY AVE.   1.3 STREET ADDRESS   1.4 CITY. ST-ZIP	TITLE	, –	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
CITY-ST-7P	NAME			1.2 NAME		
TITLE	STREET ADDRESS	,		<b>1</b>		
NORDIN, RALPH			D Street			
STREET ADDRESS   3201 CAPITAL CIRCLE, N.E.   23 STREET ADDRESS   2.4 CITY-ST-ZIP		<del>-</del>	T DELETE			L Change L Aboltion
TALLAHASSEE FL 32302   2.4 city-\$t-Zip	ı			I i		
TITLE	ľ					
NAME   PARROTT, STANLEY   10 HUDSON PLAZA, 435 NORTH GLYNN STREET   3.3 STREET ADDRESS   5.4 CITY-ST-ZIP			DELETE		· · · · · · · · · · · · · · · · · · ·	Change Addition
STREET ADDRESS   10 HUDSÓN PLAZA, 435 NORTH GLYNN STREET   3.3 STREET ADDRESS   3.4 CITY-ST-ZIP		<del></del>	C percit			Change C Madicion
STREET ADDRESS   STRE			TH ALYMN STREET			
TILE			III OLIMN OINEEL			
NAME		TATETIETE ON OBETT	DELETE			Change Addition
\$1		1	<del>_</del>		•	·
CITY-ST-7IP         44 CITY-ST-7IP           TITLE         DELETE         51 TITLE         Change Addition           NAME         52 NAME         STREET ADDRESS           CITY-ST-7IP         5.4 CITY-ST-7IP         TITLE         Change Addition           NAME         DELETE         6.1 TITLE         Change Addition           NAME         6.2 NAME         STREET ADDRESS         CITY-ST-7IP           CITY-ST-7IP         6.3 STREET ADDRESS         CITY-ST-7IP						
NAME         52 NAME           STREET ADDRESS         5.3 STREET ADDRESS           CITY-S1-ZIP         5.4 CITY-S1-ZIP           TITLE         DELETE         6.1 TITLE         Change         Addition           NAME         6.2 NAME         STREET ADDRESS         6.3 STREET ADDRESS         CITY-S1-ZIP         6.4 CITY-S1-ZIP	CITY-ST-ZIP	-3		4.4 CITY-ST-ZIP		
STREET ADDRESS	TITLE		DELETE	5.1 TITLE		Change Addition
CITY-S1-ZIP         5.4 CITY-S1-ZIP           TITLE         DELETE         6.1 TITLE         Change         Addition           NAME         6.2 NAME         STREET ADDRESS         6.3 STREET ADDRESS         CITY-S1-ZIP         6.4 CITY-S1-ZIP	NAME			5.2 NAME		
TITLE         DELETE         6.1 TITLE         Change         Addition           NAME         6.2 NAME </td <td>STREET ADDRESS</td> <td></td> <td></td> <td>5.3 STREET ADDRESS</td> <td></td> <td>:</td>	STREET ADDRESS			5.3 STREET ADDRESS		:
NAME         6.2 NAME           STREET ADDRESS         6.3 STREET ADDRESS           CITY - ST - ZIP         6.4 CITY - ST - ZIP	CITY- S1-ZIP	, , , , , , , , , , , , , , , , , , ,				
STREET ADDRESS         6.3 STREET ADDRESS           City-St-ZiP         6.4 City-St-ZiP	TITLE	1	DELETE	6.1 TITLE		Change Addition
City-St-2IP 6 6.4 City-St-2IP	NAME			6.2 NAME		
	STREET ADDRESS			6.3 STREET ADDRESS		
		h i north that the later when a set of	el soleta de la filippa el en el en el el el el el		d in Contino 110 07/0VI) Flavida Otal a	on I further earth, 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 or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.