2007 FOR PROFIT CORPORATION -ANNUAL REPORT

Feb 02, 2007 08:00 AM **DOCUMENT # P00000078040 Secretary of State** STRINGER FURNITURE, INC. Mailing Address Principal Place of Business 912 N TAMIAMI TRAIL 912 N TAMIAMI TRAIL RUSKIN, FL 33570 RUSKIN, FL 33570 CR2E034 (11/05) 01062007 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3662377 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent STRINGER, ROBERT S DO NOT WRITE 912 N TAMIAMI TRAIL RUSKIN, FL 33570 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 DATE Signature, typod or printed name of registored agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. D MLE STRINGER, ROBERT S NAME 912 N TAMIAMI TRAIL STREET ADDRESS CATY-ST-ZIP RUSKIN, FL 33570 D TITLE STRINGER, CAROL T STREET ADDRESS 912 N TAMIAMI TRAIL CITY-ST-ZIP RUSKIN, FL 33570 000000617537 02/07/07-80077-017 150.00 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME. STREET ADDRESS CITY-ST-ZIP TITLE

12. 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 or supplemental 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 it changed, or on an attachment with an address, with all other like empowered.

NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE: COUL S. STRINGER

1/6/07 813-645-3889

FILED