

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000060920

Entity Name: TSK FURNITURE, INC.

FILED
Apr 06, 2009
Secretary of State

Current Principal Place of Business:

239 JONES RD.
JACKSONVILLE, FL 32220

New Principal Place of Business:

9158 TEAGUE RD
JACKSONVILLE, FL 32220

Current Mailing Address:

239 JONES RD.
JACKSONVILLE, FL 32220

New Mailing Address:

9158 TEAGUE RD
JACKSONVILLE, FL 32220

FEI Number: 01-0713036

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

YONG, FRANK J
4570 ST JOHNS AVE STE 1A
JACKSONVILLE, FL 32210 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PP () Delete
Name: KITTRELL, THOMAS J
Address: 239-4 JONES RD
City-St-Zip: JACKSONVILLE, FL 32209

Title: S () Delete
Name: STRICKLAND, SUSAN
Address: 8094 GRAYBAR PL
City-St-Zip: JACKSONVILLE, FL 32209

Title: T () Delete
Name: KITTRELL, DANA
Address: 239-4 JONES RD
City-St-Zip: JACKSONVILLE, FL 32220

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PP (X) Change () Addition
Name: KITTRELL, THOMAS J
Address: 9158 TEAGUE RD
City-St-Zip: JACKSONVILLE, FL 32220

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

Title: T (X) Change () Addition
Name: KITTRELL, DANA
Address: 9158 TEAGUE RD
City-St-Zip: JACKSONVILLE, FL 32220

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TOMMY KITTRELL

PRES

04/06/2009

Electronic Signature of Signing Officer or Director

Date