

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000000393

FILED
Jul 05, 2005
Secretary of State

Entity Name: FAMILY FURNITURE OF LAKE HAMILTON, INC.

Current Principal Place of Business:

29620 HIGHWAY 27
PO BOX 496
LAKE HAMILTON, FL 33851

New Principal Place of Business:

PO 496
LAKE HAMILTON, FL 33851

Current Mailing Address:

189 GLEN ESTE BLVD.
HAINES CITY, FL 33844

New Mailing Address:

FEI Number: 54-2090360

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PERRY, CHARLOTTE
189 GLEN ESTE BLVD.
HAINES CITY, FL 33844 US

Name and Address of New Registered Agent:

PERRY, CHARLOTTE
504 HAMILTON SHORE CT.
WINTER HAVEN, FL 33881 US

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: CHARLOTTE PERRY

07/05/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PERRY, JOSEPH P
Address: 189 GLEN ESTE BLVD.
City-St-Zip: HAINES CITY, FL 33844

Title: ST () Delete
Name: PERRY, CHARLOTTE
Address: 189 GLEN ESTE BLVD.
City-St-Zip: HAINES CITY, FL 33844

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PERRY, JOSEPH P
Address: 504 HAMILTON SHORE CT.
City-St-Zip: WINTER HAVEN, FL 33881

Title: ST (X) Change () Addition
Name: PERRY, CHARLOTTE
Address: 504 HAMILTON SHORE CT.
City-St-Zip: WINTER HAVEN, FL 33881

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CHARLOTTE PERRY

ST

07/05/2005

Electronic Signature of Signing Officer or Director

Date