2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000031394

Entity Name: FLORIDA HOME FURNISHINGS, INC.

FILED Feb 03, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

16612 RISING STAR DR CLERMONT, FL 34711

Current Mailing Address: New Mailing Address:

20 N. ORANGE AVE SUITE 407 ORLANDO, FL 32801

FEI Number: 77-0596768 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HENDRY, STONER, DELANCETT & BROWN, P.A.
20 N. ORANGE AVENUE
SUITE 600
ORLANDO, FL 32801 US

COAMEY & CLARK, PA
2699 LEE ROAD
SUITE 430
WINTER PARK, FL 32789 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: EDWARD COAMEY 02/03/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP () Delete Title: () Change () Addition Name: GARDEE, NOMAAN Name:

 Name:
 GARDEE, NOMAAN
 Name:

 Address:
 16612 RISING STAR RD
 Address:

 City-St-Zip:
 CLERMONT, FL 34711
 City-St-Zip:

Title: DDV () Delete Title: () Change () Addition

 Name:
 GARDEE, MARGARET A
 Name:

 Address:
 16612 RISING STAR RD
 Address:

 City-St-Zip:
 CLERMONT, FL 34711
 City-St-Zip:

Title: DS () Delete Title: () Change () Addition

 Name:
 WEST, GABRIELLA A
 Name:

 Address:
 16616 RISING STAR RD
 Address:

 City-St-Zip:
 CLERMONT, FL 34711
 City-St-Zip:

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: NOMAAN GARDEE DP 02/03/2005