

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000060756

FILED
Apr 29, 2005
Secretary of State

Entity Name: DISCOUNT STORE FIXTURES, INC.

Current Principal Place of Business:

1819 IONIA STREET
JACKSONVILLE, FL 32206

New Principal Place of Business:

Current Mailing Address:

1819 IONIA STREET
JACKSONVILLE, FL 32206

New Mailing Address:

FEI Number: 59-3172119

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GATES, ROBERT S
6650 LENCZUK DRIVE
JACKSONVILLE, FL 32227 US

Name and Address of New Registered Agent:

GATES, ROBERT S
21 LLOVERA PLACE
PALM COAST, FL 31264 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: ROBERT S GATES

04/29/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GATES, ROBERT S
Address: 6650 LENCZYK DRIVE
City-St-Zip: JACKSONVILLE, FL 32227

Title: D () Delete
Name: GATES, MARY LOU
Address: 6650 LENCZYK DRIVE
City-St-Zip: JACKSONVILLE, FL 32227

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: GATES, ROBERT S
Address: 21 LLOVERA PLACE
City-St-Zip: PALM COAST, FL 31264

Title: D (X) Change () Addition
Name: GATES, MARY LOU
Address: 21 LLOVERA PLACE
City-St-Zip: PALM COAST, FL 31264

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: ROBERT S GATES

D

04/29/2005

Electronic Signature of Signing Officer or Director

Date