## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000129351

Entity Name: NET FURNITURE CORP.

FILED Apr 11, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** P O BOX 1508 212 SOUTH COLLINS STREET NOKOMIS, FL 34274 PLANT CITY, FL 33563 **Current Mailing Address: New Mailing Address:** P O BOX 1508 212 SOUTH COLLINS STREET NOKOMIS, FL 34274 PLANT CITY, FL 33563 FEI Number: 61-1460349 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of New Registered Agent: Name and Address of Current Registered Agent: PRUITT, DAN PREWITT, DAN 5777 BENEVA RD 5777 BENEVA ROAD SARASOTA, FL 34233 US SARASOTA, FL 34233 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: DAN PREWITT 04/11/2005 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PO () Delete Title: (X) Change ( ) Addition LAHTI, JEFF LAHDENPERA, JEFF W Name: Name: 4221 S TAMIAMI TR 212 SOUTH COLLINS STREET Address: Address: City-St-Zip: SARASOTA, FL 34231 City-St-Zip: PLANT CITY, FL 33563 Title: VΡ ( ) Change (X) Addition Title: ( ) Delete Name: Name: HAUGEN, KERBY A 212 SOUTH COLLINS STREET Address: Address: PLANT CITY, FL 33563 City-St-Zip: City-St-Zip: Title: Title: () Delete ( ) Change (X) Addition BILLINGSLEY, STEVEN L Name: Name: 212 SOUTH COLLINS STREET Address Address: City-St-Zip: City-St-Zip: PLANT CITY, FL 33563 Title: () Delete Title: SD ( ) Change (X) Addition WAMPLER, CARTER W Name: Name: Address: Address: 212 SOUTH COLLINS STREET City-St-Zip: City-St-Zip: PLANT CITY, FL 33563 Title: Title: ( ) Change (X) Addition ( ) Delete HICKS, PHIL E Name: Name: Address: Address: 212 SOUTH COLLINS STREET City-St-Zip: City-St-Zip: PLANT CITY, FL 33563

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: JEFF W LAHDENPERA PD 04/11/2005