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PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P03299 (5)

1. Corporation Name

ROBERDS, INC.



Principal Place of Business

1100 E. CENTRAL AVENUE
WEST CARROLLTON OH 45449-1888
US

Mailing Address

1100 E. CENTRAL AVENUE
WEST CARROLLTON OH 45449-1888
US

2. Principal Place of Business

2a. Mailing Address

21 State, Apt. #, etc.

26 State, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FLETCHER, KENNETH W.
4302 GANDY BLVD
TAMPA FL 33611

81 Name LOUIS F. BERNUCCA
82 Street Address (P.O. Box Number is Not Acceptable) 4465 GANDY BOULEVARD
83
84 City TAMPA FL 85 Zip Code 33611

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, month, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Louis Bernucca

1/19/96

(DATE)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP	DELETE
PD	FLETCHER, KENNETH W	1100 EAST CENTRAL AVENUE	DAYTON OH	☐
D	WRIGHT, DONALD C	1100 EAST CENTRAL AVENUE	DAYTON OH	☐
VTSD	WILSON, ROBERT M	1100 EAST CENTRAL AVENUE	DAYTON OH	☐
P	BERNUCCA, LOUIS F	1100 EAST CENTRAL AVENUE	DAYTON OH	☐
V	VAN AUTREVE, MICHAEL	1100 EAST CENTRAL AVENUE	DAYTON OH	☐

1. TITLE	2. NAME	3. STREET ADDRESS	4. CITY, ST, ZIP	5. CHANGE	6. ADDITION
12 NAME	13 STREET ADDRESS	14 CITY, ST, ZIP	2.1 TITLE	☐	☐
22 NAME	23 STREET ADDRESS	24 CITY, ST, ZIP	3.1 TITLE	☐	☐
32 NAME	33 STREET ADDRESS	34 CITY, ST, ZIP	4.1 TITLE	☐	☐
42 NAME	43 STREET ADDRESS	44 CITY, ST, ZIP	5.1 TITLE	☐	☐
52 NAME	53 STREET ADDRESS	54 CITY, ST, ZIP	6.1 TITLE	☐	☐
62 NAME	63 STREET ADDRESS	64 CITY, ST, ZIP			

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Louis Bernucca

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LOUIS F. BERNUCCA - President Flo model

1/19/96

Copy to File

CR2E034 (12/95)