

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000129609

FILED
Apr 30, 2005
Secretary of State

Entity Name: EXEC OFFICE FURNITURE, INC.

Current Principal Place of Business:

20950 HUFFMASTER RD
N FT MYERS, FL 33917

New Principal Place of Business:

3057 CLEVELAND AVE
FT MYERS, FL 33901

Current Mailing Address:

20950 HUFFMASTER RD
N FT MYERS, FL 33917

New Mailing Address:

3057 CLEVELAND AVE
FT MYERS, FL 33901

FEI Number: 37-1492124

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANDERSON, NANCY
20950 HUFFMASTER RD
N FT MYERS, FL 33917 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PLOPPER, ERIC
Address: 707 W DIVERSEY PKWY APT A
City-St-Zip: CHICAGO, IL 60614

Title: D () Delete
Name: ANDERSON, WINSTON
Address: 20950 HUFFMASTER RD
City-St-Zip: N FT MYERS, FL 33917

Title: D () Delete
Name: ANDERSON, NANCY
Address: 20950 HUFFMASTER RD
City-St-Zip: N FT MYERS, FL 33917

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: PLOPPER, ERIC
Address: 2255 W. ERIE STREET
City-St-Zip: CHICAGO, IL 60612

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: NANCY J ANDERSON

SECR

04/30/2005

Electronic Signature of Signing Officer or Director

Date