

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000100877

**FILED**  
**Feb 10, 2010**  
**Secretary of State**

**Entity Name:** DESIGNERFURNITUREOUTLETS.COM CORP.

**Current Principal Place of Business:**

8655 GULF BEACH HWY  
PENSACOLA, FL 32507

**New Principal Place of Business:**

**Current Mailing Address:**

8655 GULF BEACH  
PENSACOLA, FL 32507

**New Mailing Address:**

**FEI Number:** 20-3184780

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KAPLAN, STUART R  
5625 SEGURA AVE.  
PENSACOLA, FL 32507 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: P  
Name: KAPLAN, STUART R  
Address: 5625 SEGURA AVE.  
City-St-Zip: PENSACOLA, FL 32507

Title: VP  
Name: TAYLOR, GAIL M  
Address: 5625 SEGURA AVE.  
City-St-Zip: PENSACOLA, FL 32507

I hereby 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 all other like empowered.

**SIGNATURE:** STUART R. KAPLAN

PRES

02/10/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date