

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000165466

Entity Name: SHOWCASE FURNITURE, INC.

FILED
Jul 09, 2007
Secretary of State

Current Principal Place of Business:

99 N.E. EGLIN PARKWAY
UNIT #23
FORT WALTON BEACH, FL 32548

New Principal Place of Business:

9750 NAVARRE PKWY
NAVARRE, FL 32566

Current Mailing Address:

99 N.E. EGLIN PARKWAY
UNIT #23
FORT WALTON BEACH, FL 32548

New Mailing Address:

9750 NAVARRE PKWY
NAVARRE, FL 32566

FEI Number: 20-3980805

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ARCHULETA, JENNIFER
99 N.E. EGLIN PARKWAY
UNIT #23
FORT WALTON BEACH, FL 32548 US

Name and Address of New Registered Agent:

ARCHULETA, JENNIFER
9750 NAVARRE PKWY
NAVARRE, FL 32566 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: JENNIFER ARCHULETA

07/09/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P D () Delete
Name: ARCHULETA, STEVE
Address: 99 N.E. EGLIN PARKWAY UNIT #23
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: VSTD () Delete
Name: ARCHULETA, JENNIFER
Address: 99 N.E. EGLIN PARKWAY UNIT #23
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P D (X) Change () Addition
Name: ARCHULETA, STEVE
Address: 9750 NAVARRE PKWY
City-St-Zip: NAVARRE, FL 32566

Title: VST (X) Change () Addition
Name: ARCHULETA, JENNIFER
Address: 9750 NAVARRE PKWY
City-St-Zip: NAVARRE, FL 32566

Title: O () Change (X) Addition
Name: BLAKEMAN, NORESA
Address: 777 EAST QUARTZ AVE
City-St-Zip: SANDY VALLEY, NV 89109

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: JENNIFER ARCHULETA

VP

07/09/2007

Electronic Signature of Signing Officer or Director

Date