FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #
1. Corporation Name

P27876

WAREHOUSE HOME FURNISHINGS DISTRIBUTORS INC.

WANELOUSE HOME I OTHIOTIMOS DISTRIBUTORO, INC.									
Principa' Place o	of Business	Mailing Address						, •.•	
711 BELLEVUE AVENUE DUBLIN GA 31021		711 BELLEVUE AVENUE DUBLIN GA 31021							
						3. Date Incorporated or Qualified 01/19/1990	3a. Date of L 02/2	ast Re 7/199	
2. Principal Place of Business		2a. Mailing Address				4. FEI Number			applied For
21		26							lot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	·			5. Certificate of Status Desired See Require			
City & State		City & State	City & State			6. Election Campaign Financing			May Be
23		28				Trust Fund Contribution			to Fees
Zip Country		Zip				8. This corporation has liability for intangible tax under s 199.032,			
24	25	29	30			Florida Statutes Yes	□No		
	9. Name and Address of Current	Registered Agent		1		10. Name and Address of New Re	gistered Age	nt	
				81	Name				
THE PRENTICE-HALL CORPORATION S		STEM INC.		82	Street Addre	ess (P.O. Box Number is Not Acceptable)			
1201 HAYS STREET				83					
SUITE 105				03					
IALLAH/	ASSEE FL 32301			84	City		FL ⁸	5 Zip	Code
or registere familiar with SIGNATURE	the provisions of Sections 607.0502 d agent, or both, in the State of Florid n, and accept the obligations of, Section (gradue, typed or philidal name of registered a pirt is	la. Such change was authoriz on 607.0505, Florida Statutes	red by the c s.	corpo	amed corpora pration's board	ation submits this statement for the purp d of directors. I hereby accept the appoint	ose of changir ntment as reg	ng its re stered	egistered office agent. I am
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFIC	ERS AND DIF	≀ECTO!	RS IN 12
THILE	P	☐ DECETE	1 1 1	ITLE			C	hange	Addition
NAME	PAYNE, RON		1.2 N	AME					
STREET ADDRESS	U.S. HIGHWAY 441 SO.		1.3 \$1	REET.	ADDRESS				
CITY-ST-ZIP	DUBLIN GA	FTV 0.0 L VV		1Y - S1	1 - ZIP		F 7 0	hanna	F7 Addition
TITLE	SVPT	DELETE	2 17				LJ	hange	Addition
NAME	FAIRCLOTH, PHILLIP D		2 2 N		ADDDI ČĆ				
STREET ADDRESS	U.S. HIGHWAY 441 S DUBLIN GA			INEET NY-SI	ADDRESS .				
CITY-ST-ZIP TITLE	C C	[] DELETE	3.17		1 - 211			hange	Addition
NAME	GLASS, SHERWIN		3.2 N		İ				
STREET ADDRESS	5000 HUTCHINS FERRY RD		33 S	TREET	ADDRESS				ĺ
CITY-ST-ZIP	SUWANEE GA		3 4 C	ITY~S	T-Z-P				
TITLE	CFOP	DELETE	4 1]	HLE				hange	☐ Addition
NAME	Kunkler, David L		42 N	AME					
STREET ADDRESS	US HIGHWAY 441 S		438	IREE 1	ADDRESS				
CITY-ST-ZIP	DUBLIN GA			ITY-S	1 - 21P				
TITLE	SVP	₩ D ELETE	5 1 T				∐ (hange	Addition
NAME	MORGAN, BAKER		5.2 N						
STREET ADDRESS	US HIGHWAY 441 S				ADDRESS				
CITY-ST-ZIP	DUBLIN GA	DELETE		ITY - S	T - ZIP			hange	Addition
TITLE	EVP		6.1 T 6.2 N				L., (- ango	L. Addition
NAME CTOSET ADDRESS	MARLIN, JERRY US HIGHWAY 441 S				ADDRESS				
STREET ADDRESS	DUBLIN GA			THEFT TTY-S					
CITY-ST-ZIP	codify that the information a policy is	with this films is unburtarily for	niched and	d00	e not qualify fo	or the evenuation stated in Section 119 (7/31/v) Etorida	Statut	ree I further

I do hereby certify that the information supplied with this filing is voluntarily furnished and closs 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 comporation 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 1811 charged, or on an attachment with an address. Signature and Tyles on Printed name of Signing Officer on Director SIGNATURE: _

912-275-6113

Daytime Phone #