FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Apr 18 1997 8:00am

Secretary of State

4/4/97 407-783-7469

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P34678

(3)

DOWNEN FURNITURE CORP.

Principal Pag	e of Business	Mailing Address					
165 E. MERRITT AVE		186 E. MERRITT-AVE			· · · · · · · · · · · · · · · · · · ·		
MERRITT ISLAND FL-82958		MERRITT-ISLAND PL 32859	041 2				
			·	3. Date Incorporated o 07/08/1991		ate of Last Report	
	Pace of Business	28. Mailing Address	. 3	4. FEI Number		Applied F	For
21 XXX Suite Apt	Columbia DR	26 223 Co/un	nbia Ur	37-1216805	1	Not Apple	
22 Suit		27 Suite 316		5. Certificate of Status	Desired	\$8.75 Addition Fee Required	
City & Stal		City & State		6. Election Campaign F	inancina	\$5.00 May B	
23 CAPE	CANGUERAL, FL	28 CAPE CANAL		- Trust Fund Contribut		Added to Fees	
. Zip 	Country	Zip	Country	8. This corporation has)32,
24 3292	20 25 Brand 9. Name and Address of Current		30 BrevArd	Florida Statutes	N Yes [
nov.	WEN, CHARLES	negistered Agent	81 Name	10. Name and Address	of New Hegistered	Agent	•
	E-MERRITT-AVE	•	<i>U</i> o	WHEN, Charles			
	RITT-ISLAND FL-82083		82 Street	Address (P.O. Box Number is N 3 COLUMBIA D	ot Acceptable)		
(7157)			83		:		
		•		ite 316	······································		
			84 CTYA 1	PE CANAVEYAL	FL	85 Zip Code 32920	.
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statute	s, the above-named			changing its regis	stered
agent La	to the provisions of Sections 607,0502 registered agent, or both, in the State c ard lands with, and necept the obligat	ions of, Section 607.0505, Flo	umorized by the corp rida Statutes	poration's poard of directors. I hi	reby accept the app	ointment as registe	ered
SIGNATURE	Thanks Alon		eles Don	NEN	4/	4/97	
12.	Strombre, typicd or purified manus of registered agent OFFICERS AND		: Registered Agent signature	required when reinstating) ADDITIONS/CHANGE	DATE CANCELLOCATE	DISCOTORO NA	^
T ILF	CP CP	DELETE	1.1 TITLE	ADDITIONS/CHANGE	5 TO OFFICERS AND		Addition
NAME	DOWNEN, CHARLES		1.2 NAME		4 .	Chango	NGGIN GIN
STREET ADORESS	1545 N BANANA RIVER DRIVE		1.3 STREET ADDRESS		:		
CHY-ST ZIF	MERRITT ISLAND FL		1.4 CITY - ST - ZIP				
TITLE	STD	DELETE	2.1 TITLE			Change A	Addition
NAME	DOWNEN, CHARLES F		2.2 NAME				
STREET ADDRESS	1545 N BANANA RIVER DR		2.3 STREET ADDRESS		1		
CHY-ST ZIP	MERRITT ISLAND FL	TV	2 4 CITY-ST-ZIP		<u></u>		
31111	DT DOWNEN, JANE C.	DELETE	3.1 TITLE	NONE		Change A	Addition
NAME Assess appearance	1545 N BANANA RIVER DRIVE	•	3.2 NAME		1		
STREET ADDRESS	MERRITT ISLAND FL		3.3 STREET ADDRESS				
CITY-ST-ZIP TITLE	DS	DELETE	3.4. CITY~ST~ZIP 4.1 TITLE		1	Change A	Addition
NAME	MADDEN, BARBARA	An occure	4.2 NAME	NONE		The custon The	iaum (VII
STREET ADORESS	250 N BANANA RIVER DR		4.3 STREET ADDRESS				
CHT ST ZIP	MERRITT ISLAND FL		4.4 CiTY-S1-ZiP				
TOTLE	The second secon	DELETE	5.1 TITLE		* -	☐ Change ☐ A	Addition
NAME			5.2 NAME				
STREET ACURESS			5.3 STREET ADDRESS	the state of			
OITY - S* - ZIP			5.4 CITY-ST-ZIP	1			
10.11		DELETE	6.1 TITLE	:		☐ Change ☐ A	Addition
MAME			6.2 NAME		1		
STREET ADDRESS			6.3 STREET ADDRESS		1		

14. If on hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). 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 in higher or on an attachment with an address.