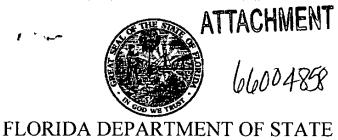
2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 13, 2006 8:00 am
Secretary of State
02-20-2006 90025 039 ***150.00

| DOCUMENT # P40546 1. Entity Name ASHLEY FURNITURE INDUSTRIES, INC. | | | | | | | | | | |
|---|--|-------------------------------------|--|--|--------------------------------------|-----------------------|--------------------------------|----------------------------|-------------------------------|--|
| Principal Place of Business Mailing Address ONE ASHLEY WAY ONE ASHLEY WAY ARCADIA, WI 54612 US | | US | : | | 66004858 | | | | | |
| Principal Place of Business 3. Mailing Address | | | | | | | | | | |
| Suite, Apt. #, etc. Suite, Apt. #, etc. | | | | | 02132006 | Chg-P | CR2E03 | 34 (11/05) | | |
| City & State City & State | | | | | 4. FEI Number 39-1141201 | | | | Applied For Not Applicable | |
| Zip Country | Zip | Countr | Country | | 5. Certificate | of Status Desired | 0 ; | 8.75 Add ee Require | litional d | |
| _ 6. Name and Address of Current | Name and Address of Current Registered Agent Na Na Name and Address of Current Registered Agent Name and Address of Current Registered Agent Name and Address of Current Registered Agent | | | .7. Name and Address of New Registered Agent | | | | | | |
| C T CORPORATION SYSTEM 1200 S. PINE ISLAND RD. PLANTATION, FL 33324 | | | Street Address (P.O. Box Number is Not Acceptable) | | | | | | | |
| | | - | City | | | | FL | Zip Cod | θ | |
| 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Sometime, those or procedure of registered agent and site of applicable (INDTE: Registered Agent signature required when remissions). DATE | | | | | | | | | | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees | | | | | | | | | | |
| 10. OFFICERS AND | DIRECTORS Delete | 11. | | 200 | | CHANGES TO OFFI | | DIRECTOR: | S IN 11 | |
| NAME WANEK, RONALD G. | | | | 1021 | e Ban | reson Road | | □ crange | gg Addition | |
| CITY-ST-ZIP ARCADIA, W 54812 | | | SI-ZIP | Jev. | a, wi | J4738 | | | | |
| TITLE VOGEL, CHARLES H. E. | Oelete | TITLE | | | - • | | | ☐ Change | Addition | |
| SIREET ADDRESS W 7477 NORTHSHORE DR. GITY-SI-ZIP ONALASKA, W 54650 | | STREE | T ADDRESS ST-Z:P | | | | | | | |
| DITLE | ☐ Deleta | TITLE | | | <u> </u> | | | ☐ Change | Addition | |
| NAME VOGEL, BEN SIREFI ADDRESS 2925 WILD ROSE LANE | | 1 | ADDRESS | ٠ | | | | | | |
| CITY-ST-ZIP ONALASKA, WI 54650 | ☐ Delete | TITLE | ST-ZP | | | | | ☐ Change | Addition | |
| NAME WANEK, TOOD R | and other | NAME | | | | | | | | |
| STREET ADDRESS W 26921 REIT LANE CITY-ST-ZIP ARCADIA, WI 54612 | | | ST-ZIP | | | | | | _ | |
| IIILE T | ☑ Delete | TITLE | i i | | | | | Change | ☐ Addition | |
| MANE BARCLAY RICHARD V STREET ADDRESS N5479 COUNTY TRUNK ZM | | NAME Stree | T ADDRESS | | | •. | | | | |
| CITY-ST-ZIP ONALASKA, WI 54650 | | | ST-Z:P | | <u> </u> | <u></u> | | | | |
| NAME RIPPLEY PAULETTE W | ☐ Delete | TITLE | 1 | | | | | ☐ Change | Addition | |
| SIREET ADDRESS N27863 COUNTY RD J CITY-S1-2P ARCADIA, W1 54612 | | | ET ADDRESS ST-ZIP | | | | | | į | |
| 12. Thereby certify that the information supplied with indicated on this report or supplemental report of the corporation or the receiver or trustee emphased, or on an attachment with an address, SIGNATURE: Dall Dan | s true and accurate and that i lowered to execute this report | or the exemy signature is required. | Implions con ure shall have ed by Chapt | re the s ler 607 | same legal elle 7. Florida Statut | et as if made under (| oath; that I a a appears ir | m an officar Block 10 o | or director r Block 11 il | |



Division of Corporations

February 22, 2006

ASHLEY FURNITURE INDUSTRIES, INC. ONE ASHLEY WAY ARCADIA, WI 54612 US

Subject: ASHLEY FURNITURE INDUSTRIES, INC.

Reference Number:

P40546

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report has not been filed and a copy is being returned for the following correction(s):

Provide the title(s) of each officer/director listed on the report or on an attachment.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/JE ANNUAL REPORTS SECTION # plase attached thinks
what of the services ahassee, Florida 32314

P.O. BOX 6327 - Tallahassee, Florida 32314

ALIAUMMENT

le6004858

#P40546

ASHLEY FURNITURE INDUSTRIES, INC.

Owners, Corporate Officers

- 1,2,3 Ronald G. Wanek Chairman of the Board 417 King Street Arcadia, WI 54612
- 1,3 Charles H.E. Vogel W. 7477 Northshore Drive Onalaska, WI 54650
- 1,2,3 Todd R. Wanek CEO / President W 26921 Mesa Lane Arcadia, WI 54612
- Ben Vogel 2925 Wild Rose Lane Onalaska, WI 54650
- 2 Shari Wagner, Secretary & Treasurer W30656 County Road JJ Arcadia, WI 54612
- ___2 ___ Paulette W. Rippley Assistant Secretary N27863 County Road J Arcadia, WI 54612
 - Dale Barneson Assistant Treasurer W2618 Pine Road Eleva, WI 54738
 - 1 Owner
 - 2 Officer
 - 3 Board of Directors