

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

**APPROVED
AND
FILED**

95 MAY -1 PM 3:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995	 FLORIDA DEPARTMENT OF STATE Sandra B. Matham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P93000072295 (7)

1. Corporation Name
J.C. EAST FOWLER FL III, INC.

Principal Place of Business 1515 EAST FOWLER AVENUE TAMPA FL 33612 US	Mailing Address 417 CROSSWAYS PARK DRIVE WOODBURY NY 11797 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 10/11/1993		3a. Date of Last Report 07/12/1994	
21		26 JENNIFER CONVERTIBLES, INC.		4. FEI Number 58-2099032		Applied For Not Applicable	
22 State, Apt. #, etc.		27 State, Apt. #, etc.		5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
23 City & State		28 WOODBURY, NY		6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
24 Zip		25 Country		29 11797		30 USA	
25		29		30		31	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
SNEIDER, BARBARA H 7079 WOODBRIDGE COURT BOCA RATON FL 33434				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City			
				85 Zip Code			
				FL			

11. Pursuant to the provisions of Sections 607.0405 and 607.1504, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0501, Florida Statutes.

SIGNATURE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
12a	12b	13a	13b
NAME	NAME	13a	13b
STREET ADDRESS	STREET ADDRESS	13a	13b
CITY, ST, ZIP	CITY, ST, ZIP	13a	13b
12a	12b	13a	13b
NAME	NAME	13a	13b
STREET ADDRESS	STREET ADDRESS	13a	13b
CITY, ST, ZIP	CITY, ST, ZIP	13a	13b
12a	12b	13a	13b
NAME	NAME	13a	13b
STREET ADDRESS	STREET ADDRESS	13a	13b
CITY, ST, ZIP	CITY, ST, ZIP	13a	13b
12a	12b	13a	13b
NAME	NAME	13a	13b
STREET ADDRESS	STREET ADDRESS	13a	13b
CITY, ST, ZIP	CITY, ST, ZIP	13a	13b
12a	12b	13a	13b
NAME	NAME	13a	13b
STREET ADDRESS	STREET ADDRESS	13a	13b
CITY, ST, ZIP	CITY, ST, ZIP	13a	13b

14. I, the undersigned, certify that the information supplied with this report is voluntarily furnished and drawn from publicly available sources. I further certify that the information submitted in 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. I am an officer or director of the corporation in the manner or position represented to be outside this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12a of this report and is attached to the information supplied with this report.

SIGNATURE:  **Harley Greenfield** 4/18/95 (516) 961 9000