FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 PM 7:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000076620 (2)**

1. Corporation Name

P.V.C. CHAIR COMPANY OF LAKELAND, INC.

Principal Place of Business	Mailing Address
235 STATE RD. 207 SUITE 2B ST. AUGUSTINE FL 32095	~~235 STATE RD. 207~~ 5731 S. FLORIDA AVE, ~~SUITE 2B~~ LAKELAND FL 33813 ~~ST. AUGUSTINE FL 32095~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 11/04/1993	3a. Date of Last Report: 05/01/1994		
2. Principal Place of Business 21	2a. Mailing Address 26: 5731 S. FLORIDA AVE	4. FEI Number: 59-3209744	☐ Applied For ☐ Not Applicable
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
City & State 23	City & State 28: LAKELAND FL	6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
Zip 24 / County 25	Zip 29: 33813 / County 30: USA	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No	

9. Name and Address of Current Registered Agent

CRAWFORD, JOHN R
225 WATER ST.
SUITE 900
JACKSONVILLE FL 32202

10. Name and Address of New Registered Agent

81 Name: RICHARD GOLDRICH
82 Street Address (P.O. Box Number is Not Acceptable): 5731 S. FLORIDA AVE
83
84 City: LAKELAND FL 85 Zip Code: 33813

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: Richard Goldrich — DATE: 4/24/95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required where required)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	☐ Change ☐ Addition
NAME	BARODDY, TERRANCE A	12 NAME	
STREET ADDRESS	235 STATE RD. 207, STE. 2B	13 STREET ADDRESS	
CITY-ST-ZIP	ST. AUGUSTINE FL 32084	14 CITY-ST-ZIP	
TITLE	D	21 TITLE	☐ Change ☐ Addition
NAME	GOLDRICH, RICHARD	22 NAME	
STREET ADDRESS	235 STATE RD. 207, STE. 2B	23 STREET ADDRESS	
CITY-ST-ZIP	ST. AUGUSTINE FL 32084	24 CITY-ST-ZIP	
TITLE	D	31 TITLE	☐ Change ☐ Addition
NAME	OAKES, JOHN	32 NAME	
STREET ADDRESS	235 STATE RD. 207, STE. 2B	33 STREET ADDRESS	
CITY-ST-ZIP	ST. AUGUSTINE FL 32084	34 CITY-ST-ZIP	
TITLE	D	41 TITLE	☐ Change ☐ Addition
NAME	HARDY, STEPHEN	42 NAME	
STREET ADDRESS	235 STATE RD. 207, STE. 2B	43 STREET ADDRESS	
CITY-ST-ZIP	ST. AUGUSTINE FL 32084	44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 above, or on an attachment with an address.

SIGNATURE: ✓ Richard Goldrich — ✓ 4/24/95 — (904) 829-5400
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0007837 CP