2005 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P94000024492

1. Entity Name
JAYNOR FURNISHINGS, INC.

Principal Place of Business	Mailing Address
5807 N.W. 120 AVENUE	5807 N.W. 120 AVENUE
CORAL SPRINGS, FL 33076	CORAL SPRINGS, FL 33076

DO NOT WRITE IN THIS SPACE

01042005   No Chg-P   CR2E034 (10/03)

4. FEI Number	Applied For
11-2802885	Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

GOLISANO, NORMA A
5807 N.W. 120 AVENUE
CORAL SPRINGS, FL 33076

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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 _____ JOHN C. GOLISANO Pres.   4/5/05

Signature, typed or printed name of registered agent and title if applicable.   (NOTE, Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐   **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DPST
NAME	GOLISANO, JOHN C
STREET ADDRESS	5807 N.W. 120 AVENUE
CITY-ST-ZIP	CORAL SPRINGS, FL 33076

TITLE	ST
NAME	GOLISANO, NORMA A
STREET ADDRESS	5807 N.W. 120 AVENUE
CITY-ST-ZIP	CORAL SPRINGS, FL 33076

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04/07/05-80027-024 150.00

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12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____   1/5/05   954-755-6713

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #