2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 17, 2009
Secretary of State

DOCUMENT# P94000081816

Entity Name: ROOMS TO GO NORTH CAROLINA CORP.

Current Principal Place of Business:

11540 HWY 92 EAST
SEFFNER, FL 33584

New Principal Place of Business:

Current Mailing Address:

11540 HWY 92 EAST
SEFFNER, FL 33584

New Mailing Address:

FEI Number: 59-3299900 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BEYER, DAVID A
C/O DLA PIPER US LLP
100 NORTH TAMPA STREET, SUITE 2200
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	PD	( ) Delete
Name:	SEAMAN, JEFFREY	
Address:	400 PERIMETER CENTER TERRACE, SUITE 800	
City-St-Zip:	ATLANTA, GA 30346	
Title:	VST	( ) Delete
Name:	FINKEL, JEFFREY	
Address:	6475 E. JOHNS CROSSING	
City-St-Zip:	DULUTH, GA 30097	
Title:	DV	( ) Delete
Name:	STEIN, LEWIS	
Address:	11540 HIGHWAY 92 EAST	
City-St-Zip:	SEFFNER, FL 33584	
Title:	V	( ) Delete
Name:	KETTLE, J. MICHEAL	
Address:	400 PERIMETER CENTER TERRACE, SUITE 800	
City-St-Zip:	ATLANTA, GA 30346	
Title:	V	( ) Delete
Name:	WEITZNER, PETER	
Address:	400 PERIMETER CENTER TER STE 800	
City-St-Zip:	ATLANTA, GA 30346	
Title:	VS	( ) Delete
Name:	SHEER, JAMIE	
Address:	11540 HWY 92 E	
City-St-Zip:	SEFFNER, FL 33584	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	VS	(X) Change ( ) Addition
Name:	KETTLE, J. MICHEAL	
Address:	400 PERIMETER CENTER TERRACE, SUITE 800	
City-St-Zip:	ATLANTA, GA 30346	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LEWIS STEIN V 02/17/2009

Electronic Signature of Signing Officer or Director — Date