


**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 05, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P94000091121</b> 1. Entity Name RTG FURNITURE CORP. OF GEORGIA	
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Principal Place of Business 11540 US HWY 92 EAST SEFFNER, FL 33584	Mailing Address 11540 US HWY 92 EAST SEFFNER, FL 33584
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DO NOT WRITE IN THIS SPACE



01102007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3299892	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

BEYER, DAVID A  
 101 E. KENNEDY BLVD, SUITE 2000  
 TAMPA, FL 33602

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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SEAMAN, JEFFREY 400 PERIMETER CENTER TERR. STE 800 ATLANTA, GA 30346
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VST FINKEL, JEFFREY 400 PERIMETER CENTER TERR. STE 800 ATLANTA, GA 30346
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V KETTLE, J. MICHAEL 400 PERIMETER CENTER TERR. STE 800 ATLANTA, GA 30346
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV STEIN, LEWIS 11540 HIGHWAY 92 EAST SEFFNER, FL 33584
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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U00000621041  
 02/12/07-80001-004 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:**  LEWIS STEIN-VILE PRES 1/21/07  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #