

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Feb 06 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P97000019612 (5)**
1. Corporation Name
SOUTHERN FURNITURE SALES OF BONITA, INC.



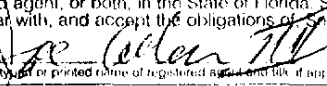
Principal Place of Business 617 WHITEHEAD STREET KEY WEST FL 33040	Mailing Address 617 WHITEHEAD STREET KEY WEST FL 33040
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 NAPLES, FL Suite, Apt. #, etc.		2a. Mailing Address 26 3808 Tamiami TR E Suite, Apt. #, etc.		3. Date Incorporated or Qualified 03/04/1997
22 City & State 23 NAPLES		27 City & State 28 FL		4. FEI Number 65-0670032
24 Zip 34112		25 Country Collier		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
26		27		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
28		29		7. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. ☒ Yes ☐ No
30		31		

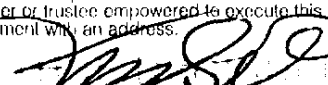
9. Name and Address of Current Registered Agent ALLEN, JOSEPH B III 617 WHITEHEAD STREET KEY WEST FL 33040		10. Name and Address of New Registered Agent	
81 Name		82 Street Address (P.O. Box Number is Not Acceptable)	
83		84 City	
85		86 Zip Code	

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  DATE **1/16/98**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	SELLERS, FRED B SR	1.2 NAME	None
STREET ADDRESS	778 NINTH STREET NORTH	1.3 STREET ADDRESS	
CITY-ST-ZIP	NAPLES FL 34102	1.4 CITY-ST-ZIP	
		2.1 TITLE	
TITLE	☐ DELETE	2.2 NAME	☐ Change ☐ Addition
NAME		2.3 STREET ADDRESS	
STREET ADDRESS		2.4 CITY-ST-ZIP	
CITY-ST-ZIP		3.1 TITLE	☐ Change ☐ Addition
	☐ DELETE	3.2 NAME	
		3.3 STREET ADDRESS	
		3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
		5.2 NAME	
		5.3 STREET ADDRESS	
		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 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 if changed, or on an attachment with an address.

SIGNATURE  DATE **1/14/98**

CR2E034 (10/97)