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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # **P97000082873**

CUSTOM FURNITURE BY TILDEN BYBEE, INC.

Principal Place of Business

FILED Mar 02, 1999 8:00 am Secretary of State

03-02-1999 90068 005 ***150.00



6342 OLD CHENEY HWY -6342 OLD CHENEY HWY ORLANDO FL 32807 ORLANDO FL 32807										
ONE AND OF E DED	~.	DO NOT WRITE IN THIS SPACE								
Change of Address					3. Date Incorporated or Qualifed 09/23/1997					
2. Principal Place of Business 2a. Mailing Address					4. FEI Number			plied For		
27 6330 OLD Chency Huye 6330 OLD Choncy Huy					59-3462653			ot Applicable		
Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certifcate of Status Desired		Fee Re	Additional equired		
City & State 23 32507 28 32507					Election Campaign Financing Trust Fund Contribution		Added	May Be to Fees		
Zip	Country Zip Country 25 29 30				8. This corporation owes the current year Intangible Personal Property Tax.					
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered Agent					
DVDEE	TUDEND		81	Name						
6330 6572 (e, tilden r Old Cheney Hwy	82	82 Street Address (P.O. Box Number is Not Acceptable)							
ORLAN	NDO FL 32807		83							
			84		\$17 T	FL	'	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 _						CATE		}		
	gnature, typed or printed name of registered agent a			nt signature required		DATE	DIDECT.	200 121 40		
12.	OFFICERS AND	□ DELETE	13.		ADDITIONS/CHANGES TO OF	-ICERS ANI	☐ Change	Addition		
_	d Bybee, tilden r	☐ DECE IE	1.1 TITLE 1.2 NAME				Change	- 1 1440 (1011)		
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i i			5.4 CITY-S	T-ZIP				İ		
CITY-ST-ZIP TITLE		☐ DELETE	6.1 TITLE				Change	Addition		
		S	6.2 NAME				•			
NAME				TADDRESS						
STREET ADDRESS			O.J STREE	7.70				j		

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, with all other like empowered.

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SIGNING OFFICER OR DIRECTOR