

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **S60637** (3)

1. Corporation Name

**FINE FURNITURE BY GORDON'S, INC.**



Principal Place of Business

**18101 S. TAMiami TR.  
FT. MYERS FL 33908**

Mailing Address

**18101 S. TAMiami TR.  
FT. MYERS FL 33908**

3. Date Incorporated or Qualified  
**06/19/1991**

3a. Date of Last Report  
**02/02/1995**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

4. FEI Number  
**65-0274240**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

6. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00 May Be  
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**GORDON, LLOYD A  
18101 S. TAMiami TR.  
FT. MYERS FL 33908**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

**FL**

85 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

(Signature typed or printed name of registered agent and date if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

P  
GORDON, LLOYD A  
18101 S. TAMiami TR.  
FT. MYERS FL  
ST  
GORDON, BETTY LOU H  
18101 S. TAMiami TR.  
FT. MYERS FL  
V  
GORDON, ROSE ANNE S  
18101 S. TAMiami TR.  
FT. MYERS FL  
T  
GORDON, SHIRLEY E  
18101 S. TAMiami TR.  
FT. MYERS FL

ST  
GORDON, BETTY LOU H  
18101 S. TAMiami TR.  
FT. MYERS FL  
V  
GORDON, ROSE ANNE S  
18101 S. TAMiami TR.  
FT. MYERS FL  
T  
GORDON, SHIRLEY E  
18101 S. TAMiami TR.  
FT. MYERS FL

V  
GORDON, ROSE ANNE S  
18101 S. TAMiami TR.  
FT. MYERS FL  
T  
GORDON, SHIRLEY E  
18101 S. TAMiami TR.  
FT. MYERS FL

T  
GORDON, SHIRLEY E  
18101 S. TAMiami TR.  
FT. MYERS FL

DELETE

DELETE

DELETE

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY - ST - ZIP

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY - ST - ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY - ST - ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY - ST - ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY - ST - ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

*Betty Lou H Gordon*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**04/06/96 941-267-5055**  
Date Daytime Phone #

CR2E034 (12/95)