

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V19483

FILED
Jan 15, 2009
Secretary of State

Entity Name: CONTEMPORARY FURNITURE OUTLET OF BOCA RATON, INC.

Current Principal Place of Business:

% FERDINANDO P. COCOZZELLI SR
318 N. O ST
LAKE WORTH, FL 33460

New Principal Place of Business:

318 NORTH O STREET
LAKE WORTH, FL 33460

Current Mailing Address:

% FERDINANDO P. COCOZZELLI SR
318 N. O ST
LAKE WORTH, FL 33460

New Mailing Address:

318 NORTH O STREET
LAKE WORTH, FL 33460

FEI Number: 65-0482482

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COCOZZELLI, FERDINANDO P. SR
318 NORTH O STREET
LAKE WORTH, FL 33460 US

Name and Address of New Registered Agent:

COCOZZELLI, FERNANDINO P SR
318 NORTH O STREET
LAKE WORTH, FL 33460 US

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: FERNANDINO P COCOZZELLI

01/15/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: COCOZZELLI, FERDINAN, DO P
Address: 318 NORTH O STREET
City-St-Zip: LAKE WORTH, FL 33460

Title: D () Delete
Name: COCOZZELLI, SANDRA,
Address: 318 NORTH O STREET
City-St-Zip: LAKE WORTH, FL 33460

Title: D (X) Delete
Name: COCOZZELLI, FRED P., JR
Address: 318 NORTH O STREET
City-St-Zip: LAKE WORTH, FL 33460

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: COCOZZELLI, FERDINAN, DO P
Address: 318 NORTH O STREET
City-St-Zip: LAKE WORTH, FL 33460

Title: VP (X) Change () Addition
Name: COCOZZELLI, SANDRA
Address: 318 NORTH O STREET
City-St-Zip: LAKE WORTH, FL 33460

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: COCOZZELLI FERNANDINO

P

01/15/2009

Electronic Signature of Signing Officer or Director

Date