

**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 # **V32521 (9)**

1. Corporation Name  
**ROGER'S HOUSE OF FURNITURE, INC.**



Principal Place of Business  
**7462 PALM RIVER ROAD  
TAMPA FL 33619**

Mailing Address  
**7462 PALM RIVER ROAD  
TAMPA FL 33619**

3. Date of Incorporation or Qualified **04/27/1992** 3a. Date of 1995 **04/17/1995**

21	2. Principal Place of Business	26	2a. Mailing Address	4.	FBI Number <b>59-3124793</b>	Applied For <input type="checkbox"/>	Not Applicable <input type="checkbox"/>
22	Suite, Apt. #, etc.	27	Suite, Apt. #, etc.	5.	Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>	
23	City & State	28	City & State	6.	Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>	
24	Zip	29	Zip	8.	This corporation has liability for intangible tax under s. 199.032 Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No		
	Country	30	Country				

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
<b>MATSON, ROGER 7462 PALM RIVER ROAD TAMPA FL 33619</b>				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City	<b>FL</b>	85

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 title of applicant) \_\_\_\_\_ (Name of Registered Agent and title of individual who is signing) \_\_\_\_\_ (Date)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	11. TITLE	12. NAME
<input type="checkbox"/> DELETE	<b>D MATSON, FAY B. 7462 PALM RIVER RD. TAMPA FL</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> DELETE	<b>D MATSON, STEVE R. 7462 PALM RIVER RD. TAMPA FL</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> DELETE	<b>D MATSON, ROGER, JR. 7462 PALM RIVER RD. TAMPA FL</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> DELETE	<b>D MATSON, ROGER 7462 PALM RIVER RD. TAMPA FL</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> DELETE	<b>D MATSON, DANA 7462 PALM RIVER RD. TAMPA FL</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> DELETE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	

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: *Roger A. Matson Jr.*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)