

**2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F10000005363

**Entity Name:** ALBANY FURNITURE INDUSTRIES, INC.**Current Principal Place of Business:**504 N. GLENFIELD RD  
NEW ALBANY, MS 38652**Current Mailing Address:**504 N. GLENFIELD RD  
NEW ALBANY, MS 38652 US**FEI Number:** 64-0858051**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**INCORP SERVICES, INC.  
17888 67TH COURT NORTH  
LOXAHATCHEE, FL 33470 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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	DIRECTOR
Name	MCLARTY, RICHARD H
Address	504 N. GLENFIELD RD
City-State-Zip:	NEW ALBANY MS 38652

Title	PRESIDENT
Name	MCLARTY, RICHARD H
Address	504 N. GLENFIELD RD
City-State-Zip:	NEW ALBANY MS 38652

Title	DIRECTOR
Name	CASEY, SANDRA
Address	504 N. GLENFIELD RD
City-State-Zip:	NEW ALBANY MS 38652

Title	SECRETARY
Name	CASEY, SANDRA
Address	504 N. GLENFIELD RD
City-State-Zip:	NEW ALBANY MS 38652

Title	TREASURER
Name	CASEY, SANDRA
Address	504 N. GLENFIELD RD
City-State-Zip:	NEW ALBANY MS 38652

Title	DIRECTOR
Name	MCCOWN, PAUL
Address	504 N. GLENFIELD RD
City-State-Zip:	NEW ALBANY MS 38652

*I hereby 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 all other like empowered.*

**SIGNATURE: RICHARD H MCLARTY****PRESIDENT****04/27/2018**

Electronic Signature of Signing Officer/Director Detail

Date