

1.) CORPORATION NAME:

National Office Furniture, Inc.

DUE DATE: **3/1/2012**

SCC ID NO: **F1869033**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

AUTH IN VI

CORPORATION SERVICES COMPANY

BANK OF AMERICA CTR 16TH FL

1111 E MAIN ST

RICHMOND, VA 23219

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	500

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1600 ROYAL ST

CITY/ST/ZIP: JASPER, IN 47549-

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME:	TITLE:	ADDRESS:	CITY/ST/ZIP/CO:	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
JAMES C THYEN	PRESIDENT/CEO	1600 ROYAL ST	JASPER, IN 47549-	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
DOUGLAS A HABIG	CHAIRMAN	1600 ROYAL ST	JASPER, IN 47549-	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
JOHN H KAHLE	SECRETARY	1600 ROYAL ST	JASPER, IN 47549-	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
ROBERT F SCHNEIDER	EVP/CFO	1600 ROYAL ST	JASPER, IN 47549-	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
DONALD W VAN WINKLE	VICE PRESIDENT	1600 ROYAL ST	JASPER, IN 47549-	<input checked="" type="checkbox"/>	<input type="checkbox"/>

NAME: R GREGORY KINCER TITLE: TREASURER ADDRESS: 1600 ROYAL ST CITY/ST/ZIP/CO: JASPER, IN 47549-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: MICHELLE R SCHROEDER TITLE: VICE PRESIDENT ADDRESS: 1600 ROYAL ST CITY/ST/ZIP/CO: JASPER, IN 47549-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: RICHARD C FARR TITLE: VICE PRESIDENT ADDRESS: 1600 ROYAL ST CITY/ST/ZIP/CO: JASPER, IN 47549-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: KEVIN D MCCOY TITLE: VICE PRESIDENT ADDRESS: 1600 ROYAL ST CITY/ST/ZIP/CO: JASPER, IN 47549-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: ROBERT E ROHLMAN TITLE: VICE PRESIDENT ADDRESS: 1600 ROYAL ST CITY/ST/ZIP/CO: JASPER, IN 47549-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: KOURTNEY L SMITH TITLE: VICE PRESIDENT ADDRESS: 1600 ROYAL ST CITY/ST/ZIP/CO: JASPER, IN 47549-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.		
/s/ JOHN H KAHLE	JOHN H KAHLE, SECRETARY	3/1/2012
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.		