

FILE NOW: FILING FEE ... 3 MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1998



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

FILED  
May 04 1998 8:00am  
Secretary of State

DOCUMENT # 177341 (5)  
Incorporation Name  
FLORIDA TILE INDUSTRIES, INC.



Principal Place of Business: ONE SIKES BLVD LAKELAND FL 33801  
Mailing Address: 1717 DEERFIELD RD DEERFIELD IL 60015-3977

2. Principal place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
211		26		02/12/1954	05/01/1997
221		27		4. FEI Number	Applied For
231		281		59-0708114	Not Applicable
241		301		5. Certificate of Status Desired	\$8.75 Additional Fee Required
				6. Extraordinary Proceedings	\$5.00 May Be Added to Fees
				8. This corporation has liability for intangible tax under s. 193.020 Florida Statutes	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
CT CORPORATION SYSTEM 8751 W BROWARD BLVD PLANTATION FL 33324		811 Name	
		821 Street Address (P.O. Box Number is Not Acceptable)	
		83	
		841 City	
		FL 851 Zip Code	

11. Pursuant to the provisions of Sections 607 0502 and 607 1509, 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		NOTE: Fill in when signature required when filing.	
12. OFFICERS AND DIRECTORS			
TITLE	T	13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS	
NAME	WILLIAMS, T C	11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
STREET ADDRESS	ONE SIKES BLVD	12 NAME	
CITY, STATE	LAKELAND FL	13 STREET ADDRESS	
		14 CITY, STATE	
TITLE	P	21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME	PRATT, THOMAS L	22 NAME	
STREET ADDRESS	ONE SIKES BLVD	23 STREET ADDRESS	
CITY, STATE	LAKELAND FL	24 CITY, STATE	
TITLE	VSD	31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME	COSTIGAN, JOHN M	32 NAME	
STREET ADDRESS	1717 DEERFIELD RD	33 STREET ADDRESS	
CITY, STATE	DEERFIELD IL	34 CITY, STATE	
TITLE	AT	41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME	CARL Johnson	42 NAME	
STREET ADDRESS	1717 Deerfield Road	43 STREET ADDRESS	
CITY, STATE	Deerfield, IL 60015	44 CITY, STATE	
TITLE	V	51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME	FLETCHER, L JOHN	52 NAME	
STREET ADDRESS	1717 DEERFIELD ROAD	53 STREET ADDRESS	
CITY, STATE	DEERFIELD IL	54 CITY, STATE	
TITLE	VP	61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME	GOOSEN, ISABELLE C	62 NAME	
STREET ADDRESS	1717 DEERFIELD ROAD	63 STREET ADDRESS	
CITY, STATE	DEERFIELD IL 60015	64 CITY, STATE	

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*[Handwritten signature]*