

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2005 8:00 am
Secretary of State

04-20-2005 90340 014 ***150.00

DOCUMENT # F97000003004 1. Entity Name SHAW CONTRACT FLOORING SERVICES, INC.					
Principal Place of Business 616 E. WALNUT AVE. DALTON, GA 30721			Mailing Address PO DRAWER 2128 MAIL DROP 06104 DALTON, GA 30722-2128 US		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
				Country	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	PD	☐ Delete	TITLE	☐ Change	☐ Addition
NAME	LONG, H. HAL		NAME		
STREET ADDRESS	616 E. WALNUT AVE.		STREET ADDRESS		
CITY-ST-ZIP	DALTON, GA 30720		CITY-ST-ZIP		
TITLE	VSD	☐ Delete	TITLE	☐ Change	☐ Addition
NAME	EMBRY, GERALD R		NAME		
STREET ADDRESS	616 E. WALNUT AVE.		STREET ADDRESS		
CITY-ST-ZIP	DALTON, GA 30720		CITY-ST-ZIP		
TITLE	T	☒ Delete	TITLE	☐ Change	☒ Addition
NAME	KIRKPATRICK, JAMES L		NAME	Mitchell, James E.	
STREET ADDRESS	616 E WALNUT AVE		STREET ADDRESS	616 E Walnut Avenue	
CITY-ST-ZIP	DALTON, GA 30720		CITY-ST-ZIP	Dalton GA 30721	
TITLE		☐ Delete	TITLE	☐ Change	☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE	☐ Change	☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE	☐ Change	☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Gerald R. Embry</u> <u>Gerald R Embry</u> <u>4/11/05</u> <u>706.278.3812</u>					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					

50040237



04052005 Chg-P CR2E034 (10/03)

4. FEI Number **58-2240471** Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**