

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000121140

FILED  
Jan 05, 2007  
Secretary of State

Entity Name: PRESTIGE CARPET OF DAYTONA, INC.

**Current Principal Place of Business:**

2150 S. NOVA RD.  
UNITC  
S. DAYTONA, FL 32119

**New Principal Place of Business:**

**Current Mailing Address:**

2150 S. NOVA RD.  
BOX A  
S. DAYTONA, FL 32119

**New Mailing Address:**

FEI Number: 59-3761402      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

FOSTER, WALTER E III  
C/O PRESTIGE  
315 S PALMETTO AVENUE  
DAYTONA BEACH, FL 32114 US

**Name and Address of New Registered Agent:**

FOSTER, WALTER E III  
C/O PRESTIGE CARPET OF DAYTONA  
315 S PALMETTO AVENUE  
DAYTONA BEACH, FL 32114 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: AIME L. BISCHOFF      01/05/2007  
\_\_\_\_\_  
Electronic Signature of Registered Agent      Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: KASEY, R. STEVE  
Address: 692 REILLY'S ROAD  
City-St-Zip: PORT ORANGE, FL 32127

Title: VP ( ) Delete  
Name: GIBSON, IV, FINLEY F  
Address: 5089 PALMETTO STREET  
City-St-Zip: PORT ORANGE, FL 32127

Title: VP (X) Delete  
Name: OSBORN, J. GREGORY  
Address: 1670 GAUDREY STREET  
City-St-Zip: DELAND, FL 32720

Title: S ( ) Delete  
Name: MONGATO, JOSEPH J  
Address: 2531 SUNSET DRIVE  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: T ( ) Delete  
Name: BISCHOFF, AIME L  
Address: 1443 TAMMANY WAY  
City-St-Zip: PORT ORANGE, FL 32129

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: AIME L. BISCHOFF      T      01/05/2007  
\_\_\_\_\_  
Electronic Signature of Signing Officer or Director      Date