## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000028955

Entity Name: WITT CUSTOM FLOORING, INC.

FILED Jan 30, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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131 TANAGER RD 540 STOKES LANDING RD ST. AUGUSTINE, FL 32095 ST. AUGUSTINE, FL 32086

**Current Mailing Address: New Mailing Address:** 

49 ANDORA ST 540 STOKES LANDING RD ST. AUGUSTINE, FL 32086 ST. AUGUSTINE, FL 32095

FEI Number: 41-2170510 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

WITT, LESLIE D WITT, LESLIE D 49 ANDORA ST 540 STOKES LANDING RD

ST. AUGUSTINE, FL 32086 US US ST.AUGUSTINE, FL 32095

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: LESLIE D WITT 01/30/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition

WITT, DUSTIN J WITT, DUSTIN J Name: Name:

49 ANDORA ST 540 STOKES LANDING RD Address: Address: City-St-Zip: ST. AUGUSTINE, FL 32086 City-St-Zip: ST. AUGUSTINE, FL 32095

VΡ Title: VΡ Title: ( ) Delete (X) Change ( ) Addition

Name: WITT, ROBERT J Name: WITT, ROBERT J

4670 A1A SOUTH APT.17B Address: 167 TELEDO ST Address: ST. AUGUSTINE, FL 32086 ST. AUGUSTINE, FL 32080 City-St-Zip: City-St-Zip:

Title: Title: COTR ( ) Delete COTR (X) Change ( ) Addition

JAY, SMEAD SANDQUIST, JAMES I Name: Name: 49 ANDORA ST 540 STOKES LANDING RD Address: Address: City-St-Zip: ST. AUGUSTINE, FL 32086 City-St-Zip: ST.AUGUSTINE, FL 32095

Title: () Delete Title: ( ) Change (X) Addition

WILLIAMSON, LINDA K Name: Name: Address: Address: 540 STOKES LANDING RD City-St-Zip: City-St-Zip: ST.AUGUSTINE, FL 32095

Title: Title: ( ) Change (X) Addition ( ) Delete

WITT, LESLIE D Name: Name:

Address: Address: 540 STOKES LANDING RD City-St-Zip: City-St-Zip: ST.AUGUSTINE, FL 32095

I hereby certify that the information supplied with this filing does not qualify 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: LESLIE D WITT Ρ 01/30/2009