

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 28, 2004 8:00 am**  
**Secretary of State**

04-28-2004 90239 021 \*\*\*150.00

**DOCUMENT # 273928**

1. Entity Name  
**LIFESTYLE CARPETS, INC.**



Principal Place of Business  
3007 E 7TH AVENUE  
TAMPA, FL 33605

Mailing Address  
3007 E 7TH AVENUE  
TAMPA, FL 33605

14011430



2. Principal Place of Business

3. Mailing Address

04272004 Chg-P CR2E034 (10/03)

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number  
59-1031980

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

THORN, W. THOMPSON III  
101 EAST KENNEDY BLVD  
SUITE 2500  
TAMPA, FL 33602

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P  
NAME SNELL, PEGGY A. *Christy, Peggy A.* ☐ Delete  
STREET ADDRESS 3208 PARKLAND BLVD  
CITY-ST-ZIP TAMPA, FL

TITLE VP  
NAME ~~LYNN JEANNE~~ *BRANT, JEANNE* ☐ Delete  
STREET ADDRESS 3007 E 7TH AVE  
CITY-ST-ZIP TAMPA, FL 33605

TITLE VP  
NAME BRANTLEY, DANIEL ☐ Delete  
STREET ADDRESS 4101 SILVER STAR RD  
CITY-ST-ZIP ORLANDO, FL 32808

TITLE VP  
NAME MURRAY, TIMMIE ☐ Delete  
STREET ADDRESS 1113 MOOK STREET  
CITY-ST-ZIP BRANDON, FL 33510

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
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: *Jimmie R. Murray*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/04 813-248-1793  
Date Daytime Phone #