2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 11, 2005 8:00 am
Secretary of State
02-17-2005 90026 044 ***150.00

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1st MOORE CR2E034 (10/04)

DOCUMENT # 185895

1. Entity Name
CUSTOM FLOORS INC OF PANAMA CITY

Principal Place of Business	Mailing Address
1046 W. 23RD STREET P O BOX 15217 PANAMA CITY FL 32406	1046 W. 23RD STREET P O BOX 15217 PANAMA CITY FL 32406

2. Principal Place of Business	3. Mailing Address
1048A West 23rd St Suite, Apt. #, etc.	P O Box 15217 Suite, Apt. #, etc.
City & State: Panama City, Fl	City & State: Panama City, Fl
Zip: 32405 Country: USA	Zip: 32406 Country: USA

4. FEI Number 59-0747840 ☐ 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
FOREHAND, D. KEITH II 4421 W 18TH STREET PANAMA CITY FL 32405	Name: FOREHAND, D. KEITH II Street Address (P.O. Box Number is Not Acceptable): 1239 Huntington Ridge Rd City: Lynn Haven FL Zip Code: 32444

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: D. Keith Forehand, II 2-14-05
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee Will Be $550.00
Make Check Payable to Florida Department of State

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	ST MCNABB, KATHRYN F 302 W 23RD PLACE PANAMA CITY FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WOOD, SUZANNE F. 204 19TH STREET PORT ST. JOE FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P FOREHAND, D. KEITH II 4421 W 18TH STREET PANAMA CITY FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President FOREHAND, D. KEITH II 1239 Huntington Ridge Rd Lynn Haven, Fl 32444	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D FOREHAND, RUTH G. 3107 WEST 27TH STREET PANAMA CITY FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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: D. Keith Forehand, II 2-14-05 850-763-1698
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
D. Keith Forehand, II