

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED

06 JUL 20 PM 2:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DOCUMENT # 274422

1. Entity Name
CRAIG TILE, INC.



Principal Place of Business
4801 58TH AVE NO.
ST. PETERSBURG, FL 33714

Mailing Address
4801 58TH AVE NO.
ST. PETERSBURG, FL 33714

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

07052006

Chg-P

CR2E034 (11/05)

4. FEI Number

59-1027292

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 Now Registered Agent

NOTTKE, LYNN CAROL
10242 - 110TH STREET NORTH
LARGO, FL 33778

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 reinstating)

DATE

Amended AR is \$61.25

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 CEO ☐ Delete
NAME MONTI, CAROL V.
STREET ADDRESS 8421 ANNWOOD ROAD
CITY-ST-ZIP LARGO, FL 33777

TITLE D ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
300078120243
07/28/06 01043 022 ***61.25

TITLE P ☐ Delete
NAME CANTO, FRANK A.
STREET ADDRESS 10317 TARRAGON DRIVE
CITY-ST-ZIP RIVERVIEW, FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE AV ☐ Delete
NAME WARD, ELLIS L
STREET ADDRESS 115-90 AVE.
CITY-ST-ZIP TREASURE ISLAND, FL

TITLE V ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VPT ☐ Delete
NAME NOTTKE, LYNN CAROL
STREET ADDRESS 10242-110 ST., N.
CITY-ST-ZIP LARGO, FL

TITLE CEO/T/D ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE S ☐ Delete
NAME BERCZKI, MARLENE R.
STREET ADDRESS 4940-55 ST. N.
CITY-ST-ZIP KENNETH CITY, FL

TITLE D ☐ Change ☒ Addition
NAME BLACKBURN, SUSAN
STREET ADDRESS 8082 MERRIMOOR BOULEVARD
CITY-ST-ZIP LARGO, FL 33777

TITLE AV ☐ Delete
NAME TAVERNESE, ANTHONY J JR
STREET ADDRESS 2324 SOCIETY DR
CITY-ST-ZIP HOLIDAY, FL

TITLE D ☐ Change ☒ Addition
NAME VEST, ROGER
STREET ADDRESS 10905 - 91ST AVENUE N
CITY-ST-ZIP SEMINOLE, FL 33772

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

Lynn C. Nottke
Lynn C. Nottke, CEO

5/22/06

#298581

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

AM 5/25