FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 PM 2:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 366909 (0)

1. Corporation Name
CARPET BROKERS OF GAINESVILLE, INC.

Principal Place of Business
611 NORTH MAIN STREET
GAINESVILLE FL 32601

Mailing Address
611 NORTH MAIN STREET
GAINESVILLE FL 32601

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 07/13/1970
3a. Date of Last Report: 08/04/1994

2. Principal Place of Business: 21
2a. Mailing Address: 26
Suite, Apt. #, etc: 22
Suite, Apt. #, etc: 27
City & State: 23
City & State: 28
Zip: 24 Country: 25
Zip: 29 Country: 30

4. FEI Number: 59-1303303 — Applied For / Not Applicable

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

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

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

SILVERMAN, TERRY N.
605 NORTHEAST FIRST ST.
SUITE G
GAINESVILLE FL 32601

10. Name and Address of New Registered Agent

81 Name: Frank P. Saier
82 Street Address (P.O. Box Number is Not Acceptable): 1330-B NW 6th St
83
84 City: Gainesville FL 85 Zip Code: 32601

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Frank P. Saier — Frank P. Saier — 6-2-95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when resigning) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	☐ Change ☐ Addition
NAME	VARNADOE, EDWARD W.	1.2 NAME	
STREET ADDRESS	611 NORTH MAIN ST.	1.3 STREET ADDRESS	
CITY ST ZIP	GAINESVILLE FL	1.4 CITY ST ZIP	
TITLE	STD	2.1 TITLE	☐ Change ☐ Addition
NAME	HAWLEY, MICHAEL C.	2.2 NAME	
STREET ADDRESS	611 NORTH MAIN STREET	2.3 STREET ADDRESS	
CITY ST ZIP	GAINESVILLE FL	2.4 CITY ST ZIP	
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY ST ZIP		3.4 CITY ST ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY ST ZIP		4.4 CITY ST ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY ST ZIP		5.4 CITY ST ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY ST ZIP		6.4 CITY ST ZIP	

REMITTED BY MAY 1

$ Deposited by Bank

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Michael C. Hawley — 3-9-95 — 904-373-8488
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone

0032410 CP