## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # 464796

1. Corporation Name

FLOORCRAFT, INC.

Principal	Place	of	Business

Mailing Address

## **FILED** Mar 11, 1999 8:00 am Secretary of State

03-11-1999 90127 025 \*\*\*150.00



MELBOURNE FL 32901			MELBOURNE FL 32901		DO NOT WRITE IN THIS SPACE				
						3.	Date Incorporated or Qualifed		
							11/08/1974		
2. Principal Pla	ace of Business	2a. Mailing Ad	dress		•	4.	FEI Number		Applied For
1		26					59-1574808		Not Applicable
Suite, Apt. #	ŧ, etc.	Suite, Apt	. #. etc.			5.	Certificate of Status Desired		<b>75</b> Additional = ee Required
City & State	•	City & Sta	ite			6.	Election Campaign Financing Trust Fund Contribution		.00 May Be Ided to Fees
Zip	Country 25	Zip 29	Go.	untry		8.	This corporation owes the current year Personal Property Tax.	Intangible Yes	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent					
OTER	THE CONTINUE IS			81	Name				
STEELE, CYNTHIA K. 319 HOWARD LANE		82 Street Address (P.O. Box Number is Not Acceptable)							
MELE	BOURNE FL 32935			83					
				84	City			85	Zip Code

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	Signature, typed or printed name of registered agent and title if applie	(NOTE: Pr	egistered Agent signature require	d when reinstation)	DATE	}
12.	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Re		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR		RS IN 12
TITLE	V	☑ DELETE	1.1 TITLE		☐ Change	☐ Addition
NAME	STEELE, WILLIAM		1.2 NAME	·		(
STREET ADDRESS	404 SOUTH HARBOR CITY BLVD.		1,3 STREET ADDRESS			
CITY-ST-ZIP	MELBOURNE FL		1.4 CITY-ST-ZIP			
TITLE	PTD	☐ DELETE	2.1 TITLE		☐ Change	☐ Addition
NAME	STEELE-GERMANY, CYNTHA		2.2 NAME			
STREET ADDRESS	404 S. HARBOR CITY BLVD.		2.3 STREET ADDRESS		·	
CITY-ST-ZIP	MELBOURNE FL		2.4 CITY-ST-ZIP			
TITLE	VSD	☐ DELETE	3.1 TITLE		☐ Change	☐ Addition
NAME	GERMANY, JOHN W.		3.2 NAME			
STREET ADDRESS	404 S. HARBOR CITY BLVD.		3,3 STREET ADDRESS			
CITY-ST-ZIP	MELBOURNE FL		3,4, CITY-ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE		Change	☐ Addition I
NAME			4, 2 NAME	<u>-</u>		
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE		Change	☐ Addition
NAME			5.2 NAME			
STREET ADDRESS			53 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE		Change	☐ Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			ľ
CITY-ST-ZIP			6.4 CITY-ST-ZIP	Section 110 07/2\/i) Florida Statutes		

indicated on this annual report or 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 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 of 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 of an attackment with an address with all reports. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), I

SIGNATURE:

Cynthia Steele-Germany SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Jan 15, 1999 (407)724-6982