

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 557114

FILED  
Apr 01, 2009  
Secretary of State

Entity Name: CARPET N' DRAPES, INC.

**Current Principal Place of Business:**

8956 PHILLIPS HWY  
JACKSONVILLE, FL 322561304

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 56110  
JACKSONVILLE, FL 322416110

**New Mailing Address:**

FEI Number: 59-1794203      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MODLING, A. CALVIN  
8956 PHILLIPS HWY  
JACKSONVILLE, FL 32256      US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: V      ( ) Delete  
Name: COPPENBARGER, RONNIE, D.  
Address: 7890JAMES ISLAND TRAIL  
City-St-Zip: JACKSONVILLE, FL 32241

Title: P      ( ) Delete  
Name: MODLING, A. CALVIN,  
Address: 2848 OAKLAND  
City-St-Zip: GREEN COVE SPRINGS,, FL 32043

Title: S      ( ) Delete  
Name: COPPENBARGER, TONJA,  
Address: 7890 JAMES ISLAND TRAIL  
City-St-Zip: JACKSONVILLE, FL 32241

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: A. CALVIN MODLING

P

04/01/2009

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date