

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 25, 2006 08:00 AM
Secretary of State

DOCUMENT # F03000003544

1. Entity Name
LUMBER LIQUIDATORS, INC.



Principal Place of Business
3000 JOHN DEERE ROAD
TOANO, VA 23168

Mailing Address
3000 JOHN DEERE ROAD
TOANO, VA 23168



04142006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
04-3229199

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525

**DO NOT WRITE
IN THIS SPACE**

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

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
P
SULLIVAN, THOMAS D
3000 JOHN DEERE ROAD
TOANO, VA 23168

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
CFO
MARCUS, HARVARD F
3000 JOHN DEERE ROAD
TOANO, VA 23168

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
SULLIVAN, THOMAS D
3000 JOHN DEERE ROAD
TOANO, VA 23168

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
CAO
KAUZZLARICH, JOHN H CAO
3000 JOHN DEERE RD
TOANO, VA 23168

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

100000531830
05/06/06-80061-009 150.00

**DO NOT WRITE
IN THIS SPACE**

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:

Signature
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CAO

4/14/06

Date

757 259-4283

Daytime Phone #