## 2008 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# F04000005285

Title:

Name:

Address: City-St-Zip:

Entity Name: PROFESSIONAL COMMERCIAL FLOORING CO., INC.

FILED Jul 14, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1922 WOODLANDS INDUSTRIAL DRIVE TRUSSVILLE, AL 35173 **Current Mailing Address: New Mailing Address:** P.O. BOX 100429 BIRMINGHAM, AL 35210 FEI Number: 63-0866844 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CROWE, TOM L 301 EAST HICKORY AVENUE CRESTVIEW, FL 32536 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: TOM L. CROWE Electronic Signature of Registered Agent Date In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition LATTA, MARK B Name: Name: P.O. BOX 101912 Address: Address: City-St-Zip: BIRMINGHAM, AL 35210 City-St-Zip: Title: DVP Title: () Delete () Change () Addition Name: LATTA, CHARLES Name: 156 LAKE LANDING Address: Address: City-St-Zip: SHELBY, AL 35143 City-St-Zip: Title: DST Title: ( ) Delete () Change () Addition LATTA, TINA G Name: Name: P.O. BOX 10192 Address: Address: City-St-Zip: BIRMINGHAM, AL 35210 City-St-Zip: Title: VΡ () Delete Title: () Change () Addition ODEN, GLEN Name: Name: Address: 2775 PINEDALE ROAD Address: City-St-Zip: ASHVILLE, AL 35953 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: MARK B. LATTA PRES 07/14/2008

( ) Delete

EASON, OLANDUS

1820 CENTER ST. S

BIRMINGHAM, AL 35205

() Change () Addition