

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F07000000759

**FILED**  
**Jan 10, 2011**  
**Secretary of State**

**Entity Name:** COMPLETE FLOORING INSTALLATION, INCORPORATED

**Current Principal Place of Business:**

1717 PATTERSON STREET  
DECATUR, IN 46733

**New Principal Place of Business:**

**Current Mailing Address:**

1717 PATTERSON STREET  
DECATUR, IN 46733

**New Mailing Address:**

**FEI Number:** 35-2132801

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SHARPE BECKER, HEATHER  
1403 14TH LANE  
PALM BEACH GARDENS, FL 33418 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

**OFFICERS AND DIRECTORS:**

Title: CP  
Name: SHARPE, LINDA E  
Address: 1234 WOODRIDGE DR  
City-St-Zip: DECATUR, IN 46733

Title: SD  
Name: RASH, MARILYN  
Address: 10900 JACK NICKLAUS BLVD  
City-St-Zip: NORTH PALM BEACH, FL 33408

I hereby 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 all other like empowered.

SIGNATURE: LINDA E. SHARPE

CP

01/10/2011

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

\_\_\_\_\_  
Date