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

**FILED PROFIT** Mar 13 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT #

1. Corporation Name F26823 STINSON CARPETS, INC. Principal Place of Business Mailing Address 2110 EDENFIELD PL. 2110 EDENFIELD PL. LAKELAND FL 33801 LAKELAND FL 33801 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/13/1981 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-2074442 Not Applicable Suite, Apt. #. etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. ☐ Yes g, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **B1** Name STINSON, JAMES W. 2110 EDENFIELD PL 82 Street Address (P.O. Box Number is Not Acceptable) LAKELAND.F L 83 84 City 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 applicable. (NOTE: Registered Agent algnature required when reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change ■ Addition TITLE 1.1 TITLE STINSON, JEAN NAME 1.2 NAME STREET ADDRESS 2909 REDWOOD AV 1.3 STREET ADDRESS LAKELAND, FL 00000 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change TITLE 21 TITLE \_\_\_ Addition STINSON, JAMES W NAME 2.2 NAME 2909 REDWOOD AVE. STREET ADDRESS 2.3 STREET ADDRESS LAKELAND, FL 00000 CITY-ST-ZIP 2. 4 CITY - ST - ZIP TITLE DELETE 3.1 TITLE Change Addition NAME STINSON, RICHARD 32 NAME 820 SPICEWOOD STREET ADDRESS 3.3 STREET ADDRESS LAKELAND, FL 00000 CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change ■ Addition NAME STINSON, RONALD 4. 2 NAME STREET ADDRESS 1030 WATEREDGE DR 4.3 STREET ADDRESS LAKELAND, FL 00000 CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETË TITLE 5.1 TITLE Change Addition NAME STINSON, RANDAL 5.2 NAME 2611 HIGHLAND VUE CT STREET ADDRESS 5.3 STREET ADDRESS LAKELAND FL CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE TITLE 6.1 TITLE ☐ Change \_\_\_ Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

14. I hereby certify that the information 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 or 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 on an attachment with an address. Randal Fin

6.4 CITY-ST-ZIP

CITY-ST-ZIP