

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000000288

FILED
Jul 28, 2008
Secretary of State

Entity Name: LINATEX CORPORATION OF AMERICA

Current Principal Place of Business:

1550 AIRPORT ROAD
GALLATIN, TN 37066

New Principal Place of Business:

Current Mailing Address:

1550 AIRPORT ROAD
GALLATIN, TN 37066

New Mailing Address:

FEI Number: 06-1072927

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

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:

Title: P () Delete
Name: CADDLE, GREGORY
Address: 1550 AIRPORT ROAD
City-St-Zip: GALLATIN, TN 37066

Title: VT () Delete
Name: BONOMO, WAYDE
Address: 1550 AIRPORT ROAD
City-St-Zip: GALLATIN, TN 37066

Title: D () Delete
Name: OCTOMAN, MICHAEL
Address: 1550 AIRPORT RD
City-St-Zip: GALLATIN, TN 37066

Title: S () Delete
Name: BLOY, NICHOLAS
Address: 1550 AIRPORT RD
City-St-Zip: GALLATIN, TN 37066

Title: D () Delete
Name: CADDLE, GREG
Address: 1550 AIRPORT RD
City-St-Zip: GALLATIN, TN 37066

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:

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: CHERYL K BROWN

MGR

07/28/2008

Electronic Signature of Signing Officer or Director

Date