2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2009
Secretary of State

DOCUMENT# H54744

Entity Name: WAYNE WILES CARPETS, INC.

Current Principal Place of Business:

7851 SUPPLY DR
FT. MYERS, FL 33912

New Principal Place of Business:

7851 SUPPLY DRIVE
FORT MYERS, FL 33912

Current Mailing Address:

7851 SUPPLY DR
FT. MYERS, FL 33912

New Mailing Address:

7851 SUPPLY DRIVE
FORT MYERS, FL 33912

FEI Number: 59-2530639 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILES, WAYNE T.
14990 MAYA LANE
FORT MYERS, FL 33908 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PST ( ) Delete
Name: WILES, WAYNE T.
Address: 14990 MAYA LANE
City-St-Zip: FORT MYERS, FL

Title: D ( ) Delete
Name: WILES, WAYNE T.
Address: 14990 MAYA LANE
City-St-Zip: FORT MYERS, FL

Title: V ( ) Delete
Name: WILES, MARK T
Address: 15861 SWALLOWTAIL LANE
City-St-Zip: FORT MYERS, FL 33912

Title: T ( ) Delete
Name: WILES, JOHN W
Address: 3709 SE 3RD PL
City-St-Zip: CAPE CORAL, FL 33904

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:

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: WAYNE T. WILES PST 04/07/2009
Electronic Signature of Signing Officer or Director Date