


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 21, 2005 08:00 AM
Secretary of State

DOCUMENT # J29614 1. Entity Name RON PAGE CERAMIC TILE, INC.	
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Principal Place of Business
31 NORTH EDMON AVENUE
WINTER SPRINGS, FL 32708

Mailing Address
31 NORTH EDMON AVENUE
WINTER SPRINGS, FL 32708



01122005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-2715014	Applied For Not Applicable
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5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

PAGE, MARY R.
31 NORTH EDMON AVENUE
WINTER SPRINGS, FL 32708

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Mary R. Page

Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1-15-05

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PAGE, RONDIE L. 31 NORTH EDMON AVENUE WINTER SPRINGS, FL
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD PAGE, MARY R. 31 NORTH EDMON AVENUE WINTER SPRINGS, FL
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other lines empowered.

SIGNATURE: Rondie L. Page

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Rondie Lee Page

1-15-05

Date

407-3270419

Daytime Phone #

**DO NOT WRITE
IN THIS SPACE**

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01/24/05-60061 005 158.75