2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J93397

Entity Name: LANGDON FLOOR COVERING, INC.

FILED Mar 08, 2005 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

 % LANGDON STANLEY
 1140 W SR434

 1140 W. SR 434
 SUITE 100

LONGWOOD, FL 32750 LONGWOOD, FL 32750

Current Mailing Address: New Mailing Address:

% LANGDON STANLEY 1140 W SR 434 1140 W. SR 434 SUITE 100

LONGWOOD, FL 32750 LONGWOOD, FL 32750

FEI Number: 59-2865810 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

LANGDON, STANLEY STANLEY, LANGDON 1140 W SR 434 1140 W SR 434

LONGWOOD, FL 32750 US LONGWOOD, FL 32750 US

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: LANGDON STANLEY 03/08/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVST () Delete Title: PVST (X) Change () Addition Name: LANGDON, STANLEY Name: STANLEY, LANGDON

 Address:
 1140 WEST SR 434
 Address:
 1140 WEST SR 434

 City-St-Zip:
 LONGWOOD, FL 32750 US
 City-St-Zip:
 LONGWOOD, FL 32750 US

Title: D () Delete Title: () Change () Addition

 Name:
 KAMINSKI, MELISA
 Name:

 Address:
 1140 W SR 434
 Address:

 City-St-Zip:
 LONGWOOD, FL 32750
 City-St-Zip:

Title: VP () Delete Title: () Change () Addition

 Name:
 STANLEY, LEW
 Name:

 Address:
 202 HERMITS TR
 Address:

 City-St-Zip:
 ALTAMONTE SPGS, FL
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: LANGDON STANLEY PVST 03/08/2005