

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J93397

Entity Name: LANGDON FLOOR COVERING, INC.

FILED
Jan 12, 2006
Secretary of State

Current Principal Place of Business:

1140 W SR434
SUITE 100
LONGWOOD, FL 32750

New Principal Place of Business:

Current Mailing Address:

1140 W SR 434
SUITE 100
LONGWOOD, FL 32750

New Mailing Address:

FEI Number: 59-2865810

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STANLEY, LANGDON
1140 W SR 434
LONGWOOD, FL 32750 US

Name and Address of New Registered Agent:

KAMINSKI, MELISA L P
1140 W SR 434
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: MELISA L KAMINSKI

01/12/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PVST () Delete
Name: STANLEY, LANGDON
Address: 1140 WEST SR 434
City-St-Zip: LONGWOOD, FL 32750 US

Title: D () Delete
Name: KAMINSKI, MELISA
Address: 1140 W SR 434
City-St-Zip: LONGWOOD, FL 32750

Title: VP (X) Delete
Name: STANLEY, LEW
Address: 202 HERMITS TR
City-St-Zip: ALTAMONTE SPGS, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: KAMINSKI, MELISA L PRES
Address: 1140 WEST SR 434
City-St-Zip: LONGWOOD, FL 32750 US

Title: D (X) Change () Addition
Name: KAMINSKI, MELISA L D
Address: 1140 W SR 434
City-St-Zip: LONGWOOD, FL 32750 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: MELISA L. KAMINSKI

PRES

01/12/2006

Electronic Signature of Signing Officer or Director

Date