

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 13, 2006 8:00 am**  
**Secretary of State**

01-13-2006 90043 022 \*\*\*158.75

<b>DOCUMENT # J98667</b> 1. Entity Name <b>SARASOTA WHOLESALE FLOORING, INC.</b>					
Principal Place of Business <b>96 HARVEY GREENBAUM</b> <b>1931 13TH ST</b> <b>SARASOTA, FL 34236 US</b>				Mailing Address <b>96 HARVEY GREENBAUM</b> <b>1931 13TH ST</b> <b>SARASOTA, FL 34236 US</b>	
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip		Country		Zip	
Country		Country		Country	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
<b>GREENBAUM, HARVEY</b> <b>1931 13TH ST.</b> <b>SARASOTA, FL 34236</b>				Name <b>GLENN F. GREENBAUM</b> Street Address (P.O. Box Number is Not Acceptable) <b>1931 13TH ST.</b> City <b>SARASOTA</b> FL Zip Code <b>34236</b>	
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 <span style="float: right;">1/5/06</span> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2006 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be</b> <b>Added to Fees</b>	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>D</b> <b>GREENBAUM, HARVEY R.</b> <b>6826 TURNBERRY ISLE CT</b> <b>BRADENTON, FL 34202</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>P</b> <b>GREENBAUM, GLENN F</b> <b>5232 SIESTA COVE DR</b> <b>SARASOTA, FL 34242</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>ST</b> <b>GRIFFIN, SUSETTE M</b> <b>3805 80TH ST EAST</b> <b>PALMETTO, FL 34230</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>P.O. BOX 384</b> <b>TALAHASSEE, FL 32370</b>	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 like empowered.					
SIGNATURE: <span style="float: right;">1/5/06</span> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					

941-952-1982