2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 03, 2007 08:00 A Secretary of State **DOCUMENT # K85507** 1. Entity Name SUN TILE OF SARASOTA, INC. Principal Place of Business Mailing Address 8131 BLAIKIE COURT 8131 BLAIKIE COURT US SARASOTA, FL 34240 SARASOTA, FL 34240 US 05022007 No Cha-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0115566 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent JONES, DANIEL L. DO NOT WRITE 8131 BLAIKIE COURT SARASOTA, FL 34240 IN THIS SPACE his 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 Dulcie L. Sawyer. 8. The above named entity submits the obligations stered ac Vice President SIGNATURE ed agent and title if applicable U00000759520 05/24/07-80046-006 150.00 \$5.00 May Be FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing Due by September 14, 2007 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE JONES, DANIEL NAME STREET ADDRESS 8131 BLAIKIE COURT CITY-ST-ZIP SARASOTA, FL 34240 TITLE VT NAME SAWYER, DULCIE STREET ADDRESS 8131 BLAIKIE COURT SARASOTA, FL 34240 CITY-ST-ZIP TITLE SAWYER, JOHN D. JR. NAME STREET ADDRESS 8131 BLAIKIE COURT DO NOT WRITE SARASOTA, FL 34240 CITY-ST-ZIP IN THIS SPACE TITLE S JONES, LESLIE STREET ADDRESS 8131 BLAIKIE COURT CITY-ST-7IP SARASOTA, FL 34240

12. I hereby certify that the information supplied with this filling 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 trusted 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:

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP

> Dulcie L. Sawyer RINTED NAME OF SIGNING OFFICER OR DIRECTOR