

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000042666

Entity Name: TRACY'S FLOORING LLC

FILED
Apr 29, 2005
Secretary of State

Current Principal Place of Business:

3051 SW 137TH PLACE
OCALA, FL 65807 US

New Principal Place of Business:

19370 SE 95TH ST
OCKLAWAHA, FL 32179 US

Current Mailing Address:

3051 SW 137TH PLACE
OCALA, FL 65807 US

New Mailing Address:

19370 SE 95TH ST
OCKLAWAHA, FL 65807 US

FEI Number: 42-1634245

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DILLARD, SCOTT
3051 SW 137TH PLACE
OCALA, FL 65807 US

Name and Address of New Registered Agent:

DILLARD, SCOTT
19370 SE 95TH ST
OCKLAWAHA, FL 32179 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: SCOTT DILLARD

04/29/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: TRACY, JOHN
Address: 3051 SW 137TH PLACE
City-St-Zip: Ocala, FL 65807

Title: MGRM () Delete
Name: DILLARD, SCOTT
Address: 3051 SW 137TH PLACE
City-St-Zip: Ocala, FL 65807 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: TRACY, JOHN
Address: 19370 SE 95TH ST
City-St-Zip: OCKLAWAHA, FL 32179

Title: MGRM (X) Change () Addition
Name: DILLARD, SCOTT
Address: 19370 SE 95TH ST
City-St-Zip: OCKLAWAHA, FL 32179 US

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: SCOTT DILLARD

MGRM

04/29/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date