

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Sep 05, 2007 08:00 A
Secretary of State

DOCUMENT # L04000083133 1. Entity Name BURLISON FLOOR COVERING, LLC	
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Principal Place of Business 6026 VILLENEUVE LANE PENSACOLA, FL 32526	Mailing Address 6026 VILLENEUVE LANE PENSACOLA, FL 32526 US
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08292007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-1885945	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent BURLISON, WILDER L SR. 6026 VILLENEUVE LANE PENSACOLA, FL 32526

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by September 14, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BURLISON, WILDER L SR. 6026 VILLENEUVE LANE PENSACOLA, FL 32526
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BALL, THOMAS A 32 PENN HAVEN AVE. PENSACOLA, FL 32526
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11. 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 is true and accurate and that my 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: *Wilder L Burlison*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

8-26-07

Date

850-554-7408

Daytime Phone #