

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 10, 2008 8:00 am
Secretary of State

07-10-2008 90054 007 ***138.75

DOCUMENT # L05000080487					
1. Entity Name FLOORS, LLC					
Principal Place of Business 5705 N DAVIS HWY PENSACOLA, FL 32503			Mailing Address 4771 BAYOU BLVD., #332 PENSACOLA, FL 32503		
2. Principal Place of Business - No P.O. Box # 4771 Bayou Blvd		3. Mailing Address 4771 Bayou Blvd			
Suite, Apt. #, etc. Suite 332		Suite, Apt. #, etc. Suite 332			
City & State Pensacola FL		City & State Pensacola, FL			
Zip 32503		Country USA			
4. FEI Number 59-3813378		Applied For <input type="checkbox"/> Not Applicable		07082008 Chg-LLC CR2E083 (12/06)	
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required					
6. Name and Address of Current Registered Agent SPURLOCK, ROBERT L 4771 BAYOU BLVD., SUITE 332 PENSACOLA, FL 32053			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$138.75 Due by September 12, 2008		In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM SPURLOCK, ROBERT 4771 BAYOU BLVD., #332 PENSACOLA, FL 325032607	<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	MGRM SPURLOCK, FAITH 4771 BAYOU BLVD., #332 PENSACOLA, FL 325032607	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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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: <i>Robert Spurlock</i>			Date: <i>07/08/08</i>		Daytime Phone #: <i>850-291-0984</i>