

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

FILED Mar 24 1997 8:00am Secretary of State

DOCUMENT # L58355 (3) SLAYTON'S FLOOR COVERING & INTERIOR FINISHES, INC.



Principal Place of Business: 3012 E. CERVANTES ST. 1 PENSACOLA FL 32503 US

Mailing Address: 3012 E. CERVANTES ST. 1 PENSACOLA FL 32503-6421 US

3. Date Incorporated or Qualified: 03/12/1990
3a. Date of Last Report: 03/07/1996
4. FEI Number: 59-3004482
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
B. This corporation has liability for intangible tax under s. 199.032 Florida Statutes: Yes No

2. Principal Place of Business: 21 State, Apt. #, etc. 22 City & State 23 Zip Country 24

2a. Mailing Address: 26 State, Apt. #, etc. 27 City & State 28 Zip Country 29 30

9. Name and Address of Current Registered Agent

SLAYTON, JEFFREY 3560 BROOKSHIRE PENSACOLA FL 32504

10. Name and Address of New Registered Agent

81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code

11. I, the undersigned, in compliance with Sections 607.0507 and 607.0508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office to the registered agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and I accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: OFFICERS AND DIRECTORS (Initials) (Typed or Printed Name of Signing Officer or Director) DATE

12. OFFICERS AND DIRECTORS: P SLAYTON, DONALD R. SR. 3570 HOPESTILL ORAD PENSACOLA FL VP SLAYTON, JEFFREY E. 3560 BROOKSHIRE PENSACOLA FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12: 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY- ST- ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY- ST- ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY- ST- ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY- ST- ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY- ST- ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY- ST- ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i) Florida Statutes. I further certify that the information furnished on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a director or officer 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 on the front cover of this report or on an attachment with an address.

SIGNATURE: [Signature] SIGNATURE (TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)

3/19/97 904 432-3033 DATE DAYTIME PHONE #

CR2E034 (9/96)