

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L81849

FILED  
Apr 19, 2004  
Secretary of State

Entity Name: COASTAL FLOOR COVERING, INC.

## Current Principal Place of Business:

2180 US 1 SUTH  
SAINT AUGUSTINE, FL 32086

## New Principal Place of Business:

## Current Mailing Address:

2180 US 1 SUTH  
#205  
SAINT AUGUSTINE, FL 32086

## New Mailing Address:

2180 US 1 SUTH  
SAINT AUGUSTINE, FL 32086

FEI Number: 59-3022184

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KRESOS, KENNETH R  
1200 PLANTATION ISLAND DR  
SAINT AUGUSTINE, FL 32080 US

## Name and Address of New Registered Agent:

KRESGE, KENNETH R  
1200 PLANTATION ISLAND DR  
SAINT AUGUSTINE, FL 32080 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: KENNETH R KRESGE

04/19/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: NICHOLS, DUANE,  
Address: 9465 COWPEN BRANCH RD  
City-St-Zip: HASTINGS, FL

Title: D ( ) Delete  
Name: NICHOLS, TERESA,  
Address: 9465 COWPEN BRANCH RD  
City-St-Zip: HASTINGS, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: NICHOLS, DUANE,  
Address: 9465 COWPEN BRANCH RD  
City-St-Zip: HASTINGS, FL 32145

Title: D (X) Change ( ) Addition  
Name: NICHOLS, TERESA,  
Address: 9465 COWPEN BRANCH RD  
City-St-Zip: HASTINGS, FL 32145

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 or supplemental report is true and accurate and that my electronic 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TERESA NICHOLS

D

04/19/2004

Electronic Signature of Signing Officer or Director

Date