FILE NOW: FILING FEE AFTER MAY 1 IS $150.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED
95 APR 19 AM 8:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N21472 (8)

1. Corporation Name
RUG CUTTERS EXHIBITION TEAM, INCORPORATED

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
2616 MISSION ROAD #24 TALLAHASSEE FL 32304	2616 MISSION ROAD #24 TALLAHASSEE FL 32304

3. Date Incorporated or Qualified: 07/06/1987
3a. Date of Last Report: 05/01/1994
4. FEI Number: 59-2948547 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

BOYD, FOSTER SCOTT
728 EAST JEFFERSON STREET
TALLAHASSEE FL 32301-2917

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. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or 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 accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	1.1 TITLE		☐ Change ☐ Addition
NAME	BOYD, SCOTT	1.2 NAME		
STREET ADDRESS	728 E. JEFFERSON ST.	1.3 STREET ADDRESS		
CITY-ST-ZIP	TALLAHASSEE FL	1.4 CITY-ST-ZIP		
TITLE	PD	2.1 TITLE		☐ Change ☐ Addition
NAME	BOYD, SUSAN	2.2 NAME		
STREET ADDRESS	2616 MISSION RD. #24	2.3 STREET ADDRESS		
CITY-ST-ZIP	TALLAHASSEE FL	2.4 CITY-ST-ZIP		
TITLE	D	3.1 TITLE	D	☒ Change ☐ Addition
NAME	FREELAND, ALLEN	3.2 NAME	BOB MYERS	
STREET ADDRESS	5415 SOMBRA DEL LAGO	3.3 STREET ADDRESS	631 EAST CALL ST. APT.# 306	
CITY-ST-ZIP	TALLAHASSEE FL	3.4 CITY-ST-ZIP	TALLA., FL 32301	
TITLE	TD	4.1 TITLE	TD	☒ Change ☐ Addition
NAME	WHITE, PAT	4.2 NAME	CAROLE MCMULLEN	
STREET ADDRESS	2935 BAYSHORE DR.	4.3 STREET ADDRESS	1118 ALBERITON DR.	
CITY-ST-ZIP	TALLAHASSEE FL	4.4 CITY-ST-ZIP	TALLA., FL 32301	
TITLE	VD	5.1 TITLE	VD	☒ Change ☐ Addition
NAME	YOUNG, BARBARA	5.2 NAME	JAMIE ABBOT	
STREET ADDRESS	5639 LUNKER LANE	5.3 STREET ADDRESS	P.O. BOX 614 1118 THOMASVILLE RD.	
CITY-ST-ZIP	TALLAHASSEE FL	5.4 CITY-ST-ZIP	TALLA., FL. 32302	
TITLE	S	6.1 TITLE	S	☒ Change ☐ Addition
NAME	WELLS, JIM	6.2 NAME	KATHY BERNAL	
STREET ADDRESS	RT. 35, BOX 1946	6.3 STREET ADDRESS	4366 KENSINGTON RD.	
CITY-ST-ZIP	TALLAHASSEE FL	6.4 CITY-ST-ZIP	TALLA., FL. 32303	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated 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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Susan Boyd 4/15/95 904-575-6867
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0067811