2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 08, 2005 8:00 am
Secretary of State
02-08-2005 90010 036 ***150.00

DOCUMENT # P00000034245

1. Entity Name
NAPLES FLOORING GALLERY, INC.

1st MOORE CR2E034 (10/04)

Principal Place of Business	Mailing Address
771 AIRPORT RD. N NAPLES FL 34104	771 AIRPORT RD. N NAPLES FL 34104

2. Principal Place of Business		3. Mailing Address	
Naples Flooring Gallery, Inc			
Suite, Apt. #, etc. 771 N. Airport Rd. Ste 2		Suite, Apt. #, etc. Same	
City & State Naples, Florida		City & State	
Zip 34104	Country Collier	Zip	Country

4. FEI Number 59-3636645 ☒ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

INGHAM, CARL
771 AIRPORT RD. N Suite 2
NAPLES FL 34104

7. Name and Address of New Registered Agent

Name Ingham, Carl
Street Address (P.O. Box Number is Not Acceptable) 771 N. Airport Rd, Suite 2
City Naples FL Zip Code 34104

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

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee Will Be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DP	☐ Delete
NAME	INGHAM, CARL	
STREET ADDRESS	6933 WELLINGTON DRIVE	
CITY-ST-ZIP	NAPLES FL 34109	
TITLE	VS	☐ Delete
NAME	RICEMAN, KENTON	
STREET ADDRESS	218 ST JAMES PL	
CITY-ST-ZIP	NAPLES FL 34104	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 indicated on this report or supplemental 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] CARL INGHAM 1-30-05 239-436-3640
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #