## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## **FILED** Feb 16, 2005 08:00 AM

DOCUMENT # P0000051264  1. Entity Name TUTTLE TILE, INC.							Se	cretary	of State
Principal Place of Business         Mailing Address           21836 S.W. 83RD LOOP         21836 S.W. 83RD LOOP           DUNELLON, FL 34431         DUNELLON, FL 34431						;			
	· · · · · · · · · · · · · · · · · · ·								
DO NOT WRITE IN THIS SPA					CE	01132005 4. FEI Numbe	No Chg-P	CR2E034 (10	O/03) Applied For
			,			59-365			Not Applicable  5 Additional
	6. Name and A	Idress of Current Regi	stered Agent				The same design that it are always to the	Fee R	equired
21836 S.V	WILLIAM KEITH V. 83RD LOOP				the set of adaptive designation of the set o	DO	NOT W	RITE	
DUNELLON, FL 34431					7	IN 7	THIS SF	PACE	
6. 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, typad or printed	name of registered agent and title	Il applicable	(NOTE Registere	d Agent signature required	when reinstating)	<del></del>	DATE	· · · · · · · · · · · · · · · · · · ·
FIL After M	E NOW!!! FEE ay 1, 2005 Fee	IS \$150.00 will be \$550.00		ampaign Finar Contribution		00 May Be ed to Fees		7,	
10.	· · · · · · · · · · · · · · · · · · ·	OFFICERS AND DIRE	CTORS						erione southernoone south of the southernoone
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVPD TUTTLE, WILLIA 21836 S.W_83R DUNELLON, FL	D LOOP						11230870i 5-811117-0a	1 180.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST TUTTLE, SAND 21836 S.W. 83R DUNELLON, FL	D LOOP			The special section of the section o				
TITLE NAME STREET ADDRESS CITY-SY-ZIP						DO	NOT W	RITE	ACTIC AND SHEET
TITLE NAME STREET ADDRESS CITY-ST-ZIP			7			IN 7	THIS SF	ACE	: ****
RITLE NAME STREET ADDRESS CITY-ST-ZIP									Francisco Control Con
TITLE NAME STREET ADDRESS CITY-ST-ZIP		ation supplied with this f			And the second s				

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:

SMALL SCALARORS WAS SIGNATURE AND TYPEF OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR