## 2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

## Mar 08, 2005 8:00 am Secretary of State DOCUMENT # P00000067904 01-28-2005 90040 024 \*\*\*150.00 STEVE COURTNEY TILE, INC. Principal Place of Business Mailing Address 239 ASH ST 230 ASH ST WEST MELBOURNE, FL 32904 WEST MELBOURNE, FL 32904 No Chg-P 01122005 CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For FEI Number 59-3664259 \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent COURTNEY, STEVE DO NOT WRITE 230 ASH ST WEST MELBOURNE, FL 32904 IN THIS SPACE 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 Rozida. I am familiar with, and accept the obligations of registered enem. (NOTE: Recistered Agent signature required when reinstation) FILE NOWIN FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. OFFICERS AND DIRECTORS 10. PD TITLE COURTNEY, STEVE NAME 230 ASH ST STREET ADDRESS CITY-ST-ZIP WEST MELBOURNE, FL 32904 TITLE NAME STREET ADORESS CITY-ST-7IP me NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TIFLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-5T-21P 12. I hereby certify that the information supplied with this filling does not quality 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 trustate 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.

FILED