

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000081925

Entity Name: SIMPLY GRANITE, INC.

FILED
May 21, 2008
Secretary of State

Current Principal Place of Business:

7355 SW 38TH ST
SUITE 101
OCALA, FL 34474

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 772166
OCALA, FL 344772166 US

New Mailing Address:

FEI Number: 59-3667132

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVIS, CARMEN
5584 SW 39TH STREET
OCALA, FL 34474 US

Name and Address of New Registered Agent:

DAVIS, CARMEN
4505 SW 112TH STREET
OCALA, FL 34476 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:

05/21/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D/P () Delete
Name: HAMMONS, DAVID B SR
Address: 5528 SW 39TH STREET
City-St-Zip: OCALA, FL 34474 US

Title: V/T (X) Delete
Name: HAMMONS, PAMELA J
Address: 84 MOORE ROAD
City-St-Zip: KINGSTON, GA 30145 US

Title: S (X) Delete
Name: DAVIS, HENRY L
Address: 5584 SW 39TH STREET
City-St-Zip: OCALA, FL 34474 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change () Addition
Name: HAMMONS, PAM J
Address: 4549 SW 112TH STREET
City-St-Zip: OCALA, FL 34476 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: PAM J HAMMONS

P/D

05/21/2008

Electronic Signature of Signing Officer or Director

Date