

**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000090179

**FILED  
Apr 05, 2005  
Secretary of State**

**Entity Name:** MARTIN BOWLER COMMERCIAL FLOORING, INC.

**Current Principal Place of Business:**

3601 VINELAND ROAD  
SUITE 13  
ORLANDO, FL 32811

**New Principal Place of Business:**

**Current Mailing Address:**

3601 VINELAND ROAD  
SUITE 13  
ORLANDO, FL 32811

**New Mailing Address:**

**FEI Number:** 59-3724750      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LAPOINTE, SHARON A  
600 N. THACKER AVENUE  
SUITE A-12  
KISSIMMEE, FL 34741 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: MARTIN, TED  
Address: 58 MAIN STREET  
City-St-Zip: WINDERMERE, FL 34786

Title: V ( ) Delete  
Name: BOWLER, JAY  
Address: 802 OLSEN ROAD  
City-St-Zip: WINTER HAVEN, FL 33884

Title: S ( ) Delete  
Name: MARTIN, RUTHANNE  
Address: 58 MAIN STREET  
City-St-Zip: WINDERMERE, FL 34786

Title: T ( ) Delete  
Name: BOWLER, SHERYL  
Address: 802 OLSEN ROAD  
City-St-Zip: WINTER HAVEN, FL 33884

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: V (X) Change ( ) Addition  
Name: BOWLER, JAY  
Address: 1138 LAKE SHORE BOULEVARD  
City-St-Zip: LAKE WALES, FL 33853

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

Title: T (X) Change ( ) Addition  
Name: BOWLER, SHERYL  
Address: 1138 LAKE SHORE BOULEVARD  
City-St-Zip: LAKE WALES, FL 33853

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ROBIN R. AMATO

OPS

04/05/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date