2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000116196

Entity Name: CARPET & RUG CREATIONS, INC.

FILED Mar 08, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

35 WALTER MARTIN ROAD NE FT WALTON BEACH, FL 32548

Current Mailing Address: New Mailing Address:

PO BOX 2527 FORT WALTON BCH, FL 32549

FEI Number: 59-3688374 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

POOLE, MELBA J PRES POOLE, MELBA J P 35 WALTER MARTIN ROAD NE 35 WALTER MARTIN ROAD NE

US FT WALTON BEACH, FL 32548 FT WALTON BEACH, FL 32548 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: MELBA J POOLE 03/08/2006

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST () Delete Title: DPST (X) Change () Addition

Name: POOLE, MELBA J PRES Name: POOLE, MELBA J PRES PO BOX 2527

PO BOX 2527 Address: Address: City-St-Zip: FT WALTON BEACH, FL 32549 City-St-Zip: FT WALTON BEACH, FL 325492527 US

DV Title: DV Title: () Delete (X) Change () Addition Name: POOLE, JACKIE R VP Name: POOLE, JACKIE R VP

Address: PO BOX 2527 Address: PO BOX 2527

FT WALTON BEACH, FL 32549 FT WALTON BEACH, FL 325492527 US City-St-Zip: City-St-Zip:

Title: Title: DV DV

(X) Change () Addition () Delete JORDON, JENNIFER L VP JORDON, JENNIFER L VP Name: Name:

50 SELLERS PLACE 7919 49TH AVE E Address: Address:

City-St-Zip: FORT WALTON BEACH, FL 32548 City-St-Zip: BRADENTON, FL 342037472 US

Title: DV (X) Delete Title: () Change () Addition

JORDAN, ANDY L VP Name: Name: Address: 50 SELLERS PLACE Address: City-St-Zip: FORT WALTON BEACH, FL 32548 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: MELBA J POOLE D 03/08/2006