

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000014482

FILED
Apr 13, 2005
Secretary of State

Entity Name: ALL WOOD FLOORING OF SOUTHWEST FLORIDA, INC.

Current Principal Place of Business:

17600 ROCKEFELLER CIR
FT MYERS, FL 33912

New Principal Place of Business:

18753 SPRUCE DRIVE WEST
FT MYERS, FL 33912

Current Mailing Address:

17600 ROCKEFELLER CIR
FT MYERS, FL 33912

New Mailing Address:

18753 SPRUCE DRIVE WEST
FT MYERS, FL 33912

FEI Number: 65-1083271

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BARROWS, DOUGLAS D
17600 ROCKEFELLER CIR
FT MYERS, FL 33912 US

Name and Address of New Registered Agent:

BARROWS, DOUGLAS D
18753 SPRUCE DRIVE WEST
FT MYERS, FL 33912 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: DOUGLAS BARROWS

04/13/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEOP () Delete
Name: BARROWS, DOUGLAS D
Address: 17600 ROCKEFELLER CIR
City-St-Zip: FT MYERS, FL 33912

Title: VICE () Delete
Name: BARROWS, WILLIAM
Address: 17600 ROCKEFELLER CIR
City-St-Zip: FT MYERS, FL 33912

Title: SEC () Delete
Name: ABBONDONDOLO, GREG
Address: 17600 ROCKEFELLER CIR
City-St-Zip: FT. MYERS, FL 33912

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEOP (X) Change () Addition
Name: BARROWS, DOUGLAS D
Address: 18753 SPRUCE DRIVE WEST
City-St-Zip: FT MYERS, FL 33912

Title: VICE (X) Change () Addition
Name: BARROWS, WILLIAM
Address: 18753 SPRUCE DRIVE WEST
City-St-Zip: FT MYERS, FL 33912

Title: SEC (X) Change () Addition
Name: ABBONDONDOLO, GREG
Address: 18753 SPRUCE DRIVE WEST
City-St-Zip: FT. MYERS, FL 33912

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: DOUGLAS BARROWS

CEOP

04/13/2005

Electronic Signature of Signing Officer or Director

Date