

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000044861

Entity Name: WILLIAM UZ FLOORING, INC.

FILED
Apr 18, 2006
Secretary of State

Current Principal Place of Business:

3441 SE HART CIR
PORT ST LUCIE, FL 34984

New Principal Place of Business:

2400 SE VETERANS MEMORIAL PKWY
SUITE 204
PORT ST LUCIE, FL 34952

Current Mailing Address:

3441 SE HART CIR
PORT ST LUCIE, FL 34984

New Mailing Address:

FEI Number: 65-1102214 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

UZ, WILLIAM
3441 SE HART CIR
PORT ST LUCIE, FL 34984 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: D () Delete
Name: UZ, WILLIAM
Address: 3441 SE HART CIR
City-St-Zip: PORT ST LUCIE, FL 34984

Title: VP () Delete
Name: ETHERIDGE, DANIEL O
Address: 3113 SW LANDALE AVE.
City-St-Zip: PORT SAINT LUCIE, FL 34983

Title: VP () Delete
Name: ETHERIDGE, DAVID
Address: 3022 SE WAKE ROAD
City-St-Zip: PORT SAINT LUCIE, FL 34984

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: ETHERIDGE, DANIEL O
Address: 3417 SW BEVIL AVE
City-St-Zip: PORT SAINT LUCIE, FL 34983

Title: VP (X) Change () Addition
Name: ETHERIDGE, DAVID
Address: 550 SW HOLLY TERR
City-St-Zip: PORT SAINT LUCIE, FL 34984

Title: D () Change (X) Addition
Name: UZ, LISA A DIRECTO
Address: 3441 SE HART CIRCLE
City-St-Zip: PORT ST LUCIE, FL 34984

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: LISA A. UZ

D

04/18/2006

Electronic Signature of Signing Officer or Director

_____ Date