

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000076070

FILED  
Jan 26, 2009  
Secretary of State

Entity Name: CUSTOM FLOORS OF JACKSONVILLE, INC.

## Current Principal Place of Business:

1913 VILLAGEGLEN DR  
ORANGEDALE, FL 32259

## New Principal Place of Business:

1913 VILLAGEGLEN DR  
ST. JOHNS, FL 32259

## Current Mailing Address:

1913 VILLAGEGLEN DR  
ORANGEDALE, FL 32259

## New Mailing Address:

1913 VILLAGEGLEN DR  
ST. JOHNS, FL 32259

FEI Number: 52-7239102

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

OWENS, ROGER  
1913 VILLAGEGLEN DR  
ORANGEDALE, FL 32259 US

## Name and Address of New Registered Agent:

OWENS, ROGER  
1913 VILLAGEGLEN DR  
ST. JOHNS, FL 32259 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: ROGER OWENS

01/26/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: OWENS, ROGER  
Address: 1913 VILLAGEGLEN DR  
City-St-Zip: ORANGEDALE, FL 32259

Title: VTS ( ) Delete  
Name: OWENS, PATRICIA  
Address: 1913 VILLAGEGLEN DR  
City-St-Zip: ORANGEDALE, FL 32259

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: OWENS, ROGER  
Address: 1913 VILLAGEGLEN DR  
City-St-Zip: ST. JOHNS, FL 32259

Title: VTS (X) Change ( ) Addition  
Name: OWENS, PATRICIA  
Address: 1913 VILLAGEGLEN DR  
City-St-Zip: ST. JOHNS, FL 32259

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: ROGER OWENS

PRES

01/26/2009

Electronic Signature of Signing Officer or Director

Date