

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000122461

**Entity Name:** LEPAGE CARPET & TILE, INC.

**FILED**  
**Feb 03, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

44 W. GULF TO LAKE HWY.  
LECANTO, FL 34461

**New Principal Place of Business:**

**Current Mailing Address:**

44 W. GULF TO LAKE HWY.  
LECANTO, FL 34461

**New Mailing Address:**

**FEI Number:** 26-0005767

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LEPAGE, ALFRED  
244 N. SPEND A BUCK DR.  
INVERNESS, FL 34453 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

**OFFICERS AND DIRECTORS:**

**Title:** D  
**Name:** LEPAGE, ALFRED  
**Address:** 244 N. SPEND A BUCK DR.  
**City-St-Zip:** INVERNESS, FL 34453

**Title:** D  
**Name:** LEPAGE, SHARON  
**Address:** 244 N. SPEND A BUCK DR.  
**City-St-Zip:** INVERNESS, FL 34453

**Title:** S  
**Name:** LLOYD, AUDREY  
**Address:** 1018 E TRIPLE CROWN LOOP  
**City-St-Zip:** HERNANDO, FL 34442

I hereby 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 all other like empowered.

**SIGNATURE:** SHARON LEPAGE

D

02/03/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date