

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

**FILED
May 02, 2008 08:00 AM
Secretary of State**

DOCUMENT # P02000007081

1. Entity Name
FIRST FLORIDA FLOORING, INC.



Principal Place of Business
**24 WISTERIA DR
ORMOND BEACH, FL 32174**

Mailing Address
**24 WISTERIA DR
ORMOND BEACH, FL 32174**

DO NOT WRITE IN THIS SPACE



04142008 No Chg-P CR2E034 (11/05)

4. FEI Number 01-0579821	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**NEWMAN, RANDOLPH L
24 WISTERIA DRIVE
ORMOND BEACH, FL 32176**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution: **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

**TITLE PD
NAME NEWMAN, RANDOLPH L
STREET ADDRESS 24 WISTERIA DR.
CITY-ST-ZIP ORMOND BCH, FL 32176**

**TITLE STD
NAME NEWMAN, DEBRA A
STREET ADDRESS 24 WISTERIA DR.
CITY-ST-ZIP ORMOND BCH, FL 32176**

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

U00000944863
05/29/08-80116-012 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Randolph Newman*

Randolph Newman 4/15/08 386-566-2876

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #