## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000008516

City-St-Zip:

BRANDON, FL 33510

Entity Name: WOLFE'S FLOORING, INC.

FILED Apr 30, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 303 CAMPUS DR RUSKIN, FL 33570 **Current Mailing Address: New Mailing Address:** 303 CAMPUS DR RUSKIN, FL 33570 FEI Number: 94-3414820 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WOLFE, ROBERT A 303 CAMPUS DR RUSKIN, FL 33570 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PSD () Delete Title: () Change () Addition WOLFE, ROBERT A Name: Name: 303 CAMPUS DRIVE Address: Address: City-St-Zip: RUSKIN, FL 33570 City-St-Zip: Title: SEC. (X) Delete Title: () Change () Addition Name: ALLEN, RANDY Name: PO BOX 193 Address: Address: GIBSONTON, FL 33534 City-St-Zip: City-St-Zip: ( ) Delete Title: Title: TRS () Change () Addition AMATO, JAMES M Name: Name: 1122 ESTATE WOOD DRIVE Address: Address:

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.

City-St-Zip:

SIGNATURE: ROBERT A WOLFE PRES 04/30/2009