

**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Sep 20, 2004 8:00 am**  
**Secretary of State**

09-20-2004 90005 023 \*\*\*158.75

DOCUMENT # P02000011027

1. Entity Name  
C H ADAMS FLOOR COVERING, INC.



Principal Place of Business  
8504 HONOLULU DR.  
OCOE, FL 32818

Mailing Address  
8504 HONOLULU DR.  
OCOE, FL 32818

**54073310**



07022004 No Chg-P CR2E034 (10/03)

4. FEI Number  
04-3604774

Applied For  
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75** Additional  
Fee Required

**DO NOT WRITE IN THIS SPACE**

**6. Name and Address of Current Registered Agent**

ADAMS, SUSAN  
8504 HONOLULU DR.  
~~OCOE~~, FL 32818

*\*2nd request  
Orlando - to change*

**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

*Susan M. Adams*

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  
Due by September 8, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the  
corporation did not receive the prior notice.

**10. OFFICERS AND DIRECTORS**

|                |   |
|----------------|---|
| TITLE          | <i>* Director</i>                         |
| NAME           | ADAMS, SUSAN                              |
| STREET ADDRESS | 8504 HONOLULU DR.                         |
| CITY-ST-ZIP    | <del>OCOE</del> , FL 32818 <i>Orlando</i> |
| TITLE          | <i>* President</i>                        |
| NAME           | ADAMS, CURTIS                             |
| STREET ADDRESS | 8504 HONOLULU DR.                         |
| CITY-ST-ZIP    | <del>OCOE</del> , FL 32818 <i>Orlando</i> |
| TITLE          |   |
| NAME           |   |
| STREET ADDRESS |   |
| CITY-ST-ZIP    |   |
| TITLE          |   |
| NAME           |   |
| STREET ADDRESS |   |
| CITY-ST-ZIP    |   |
| TITLE          |   |
| NAME           |   |
| STREET ADDRESS |   |
| CITY-ST-ZIP    |   |

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

*Susan M. Adams*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*8/31/04*

Date

*407-463-9607*

Daytime Phone #



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
Glenda E. Hood  
DIVISION OF CORPORATIONS  
P.O. Box 6327  
Tallahassee, Florida 32314

First-Class Mail  
U.S. Postage  
**PAID**  
State of Florida  
84321

## NOTICE OF INTENT TO DISSOLVE

8823357 DT AV 0.176 AUTO TB 1 1203 32818-660304



C H ADAMS FLOOR COVERING, INC.  
8504 HONOLULU DR.  
OCOEEE FL 32818-6603

Attachment  
574073310  
# 002600 11027

### To receive the form by mail:

- Detach this postcard.
- Enter address to mail report to, if different from preprinted mailing address.
- Affix postage on reverse side and mail.
- Allow 10-14 business days to receive form.

Document # P02000011027

Mail Report to:

C H ADAMS FLOOR COVERING, INC.  
8504 HONOLULU DR.  
OCOEEE FL 32818-6603



ATTACHMENT

54073310

H P02000011027

September 7, 2004

Division of Corporations  
P O Box 6198  
Tallahassee, FL 32314

Attached you will find a completed 2004 Annual Report for CH Adams Floor Covering, INC. Please note, you have received this report late for the following reasons:

- Incorrect address – For the second year, I have asked that the city be changed from Ocoee, FL to Orlando, FL. We received nothing prior to the postcard notifying us that we needed to file the report by September 8<sup>th</sup>. This notification was received on August 31<sup>st</sup>, 2004. **PLEASE UPDATE YOUR RECORDS TO REFLECT THE CORRECT CITY**
- Hurricanes Charley and Frances – We were hit extremely hard by both hurricanes, have had extensive damage to our home and been without power for over 12 days during the last month.

Thank you,



Susan M. Adams  
Director  
CH Adams Floor Covering, INC  
8504 Honolulu Drive  
Orlando, FL 32818

407-463-9607      phone  
407-298-9046      fax