

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000011027

FILED  
Apr 29, 2007  
Secretary of State

Entity Name: C H ADAMS FLOOR COVERING, INC.

## Current Principal Place of Business:

2623 CEDAR BLUFF LANE  
OCOEE, FL 34761

## New Principal Place of Business:

## Current Mailing Address:

2623 CEDAR BLUFF LANE  
OCOEE, FL 34761

## New Mailing Address:

FEI Number: 04-3604774

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ADAMS, SUSAN  
2623 CEDAR BLUFF LANE  
OCOEE, FL 34761 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: ADAMS, SUSAN  
Address: 2623 CEDAR BLUFF LANE  
City-St-Zip: OCOEE, FL 34761

Title: D ( ) Delete  
Name: ADAMS, CURTIS  
Address: 2623 CEDAR BLUFF LANE  
City-St-Zip: OCOEE, FL 34761

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: P (X) Change ( ) Addition  
Name: ADAMS, CURTIS  
Address: 2623 CEDAR BLUFF LANE  
City-St-Zip: OCOEE, FL 34761

Title: O ( ) Change (X) Addition  
Name: ADAMS, TRACY  
Address: 2623 CEDAR BLUFF LANE  
City-St-Zip: OCOEE, FL 34761

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: SUSAN ADAMS

D

04/29/2007

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

\_\_\_\_\_  
Date