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Mar 31, 2004 8:00 am
Secretary of State

03-31-2004 90015 016 ***150.00

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000042008

1. Entity Name
RAY STANGE FLOORING, INC.

Principal Place of Business	Mailing Address
153 1/2 DIX AVE ORMOND BEACH, FL 32174	153 1/2 DIX AVE ORMOND BEACH, FL 32174

01102004 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
207 Live Oak Ave	207 Live Oak Ave
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Ormond Beach, FL	City & State: Ormond Beach, FL
Zip: 32174 Country: Volusia	Zip: 32174 Country: Folusia

4. FEI Number 75-3046595 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
STANGE, RAYMOND E 153 1/2 DIX AVE ORMOND BEACH, FL 32174	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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, 2004 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P STANGE, RAYMOND E 153 1/2 DIX AVE ORMOND BEACH, FL 32174 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 207 Live Oak Ave Ormond Beach, FL 32174
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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: [signature] Raymond E. Stange, Pres. 386-679-0956
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date 3/26/04 Daytime Phone #