

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000120436

Entity Name: FUSION FLOORS, INC.

FILED
May 06, 2009
Secretary of State

Current Principal Place of Business:

2155 ANDREA LANE
C-15
FORT MYERS, FL 33912 US

Current Mailing Address:

P. O. BOX 07005
FORT MYERS, FL 33919 US

New Principal Place of Business:

2275 BRUNER LANE
6
FORT MYERS, FL 33912 US

New Mailing Address:

FEI Number: 42-1573831 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOORE, PATRICIA S
16845 COLONY LAKES BLVD.
FORT MYERS, FL 33908 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: MOORE, PATRICIA S MS
Address: 16845 COLONY LAKES BLVD
City-St-Zip: FT. MYERS, FL 33908

Title: SEC () Delete
Name: HONER, WALTER A MR
Address: 16845 COLONY LAKES BLVD
City-St-Zip: FT. MYERS, FL 33908

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRIN (X) Change () Addition
Name: MOORE, PATRICIA S MS
Address: 16845 COLONY LAKES BLVD
City-St-Zip: FT. MYERS, FL 33908

Title: PRIN (X) Change () Addition
Name: HONER, WALTER A MR
Address: 16845 COLONY LAKES BLVD
City-St-Zip: FT. MYERS, FL 33908

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: PATRICIA MOORE

Electronic Signature of Signing Officer or Director

PRIN

05/06/2009

_____ Date