

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED  
May 02 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P02483 (6)

1. Corporation Name  
SHAW INDUSTRIES, INC.

Principal Place of Business  
616 EAST WALNUT AVENUE  
DALTON GA 30721-4409

Mailing Address  
616 EAST WALNUT AVENUE  
DALTON GA 30721-4409



21	2. Principal Place of Business	2a. Mailing Address
	Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	City & State	City & State
23	Zip	Country
24	25	29 30721-4409 30

3. Date Incorporated or Qualified	3a. Date of Last Report
06/21/1984	05/01/1996
4. FEI Number	Applied For
58-1032521	Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
FL	85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of typist or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating.)

DATE

12. OFFICERS AND DIRECTORS	
TITLE	C <input type="checkbox"/> DELETE
NAME	SHAW, J.C.
STREET ADDRESS	721 WEST AVE.
CITY - ST - ZIP	CARTERSVILLE GA
TITLE	VTD <input type="checkbox"/> DELETE
NAME	LUSK, WILLIAM C. JR.
STREET ADDRESS	1305 MORTON DR.
CITY - ST - ZIP	DALTON GA
TITLE	D <input type="checkbox"/> DELETE
NAME	HARLIN, ROBERT R.
STREET ADDRESS	3131 SLATON DR., NW
CITY - ST - ZIP	ATLANTA GA
TITLE	P <input type="checkbox"/> DELETE
NAME	LITTLE, W. NORRIS
STREET ADDRESS	3131 NORTH GOOSEHILL RD.
CITY - ST - ZIP	ROCKY FACE GA
TITLE	C <input type="checkbox"/> DELETE
NAME	HOSKINS, SOUGLAS H
STREET ADDRESS	912 W. WAUGH ST.
CITY - ST - ZIP	DALTON GA
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	Chairman Emeritus <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	104 North Goosehill Road
4.4 CITY - ST - ZIP	
5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	Hoskins, Douglas H.
5.3 STREET ADDRESS	1708 Briarcliff Circle
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Douglas H. Hoskins* Douglas H. Hoskins 4/28/97 (706) 278-3812

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)