


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 20, 2008 8:00 am
Secretary of State

03-20-2008 90037 027 ***150.00

DOCUMENT # P03000019966					
1. Entity Name DUGGINS CARPET CARE, INC.					
Principal Place of Business 1627 W GARDEN STREET PENSACOLA, FL 32501			Mailing Address P.O. BOX 10884 PENSACOLA, FL 32524		
50000748					
2. Principal Place of Business - No P.O. Box # 3101 North W Street		3. Mailing Address P.O. Box 10884			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State Pensacola, FL		City & State Pensacola, FL		4. FEI Number 38-3674582	
Zip 32505		Country USA		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent DUGGINS, TIMOTHY 1627 W GARDEN STREET PENSACOLA, FL 32501			7. Name and Address of New Registered Agent Name: Timothy L. Duggins Street Address (P.O. Box Number is Not Acceptable): 3101 North W Street City: Pensacola FL Zip Code: 32505		
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: <i>Timothy Duggins</i> DATE: 3/17/08 <small>(Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when reinstating))</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing <input type="checkbox"/> \$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	PRES DUGGINS, TIMOTHY 1627 W. GARDEN ST. PENSACOLA, FL 32501		TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Timothy L. Duggins 3101 North W Street Pensacola, FL 32505	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V THORNTON, DANIEL ABRAHAM 1627 W GARDEN STREET PENSACOLA, FL 32501		TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Daniel Abraham Thornton 3101 North W Street Pensacola, FL 32505	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental reports 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: <i>Timothy Duggins</i> 3/17/08 (850) 774 9005 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					