2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000067318

Entity Name: THE WOOD FLOOR SOURCE OF POLK COUNTY, INC.

FILED Apr 29, 2008 Secretary of State

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Current Principal Place of Business:			New Prin	New Principal Place of Business:			
4940 US H LAKELANI	1WY 98 N D, FL 33809						
Current M	lailing Addres	ss:	New Mail	New Mailing Address:			
4940 US H LAKELANI	1WY 98 N D, FL 33809						
FEI Number: 56-2374462		FEI Number Applied For ()	FEI Number Not App	olicable ()	Certificate of Status Desired ()		
Name and	Address of C	Current Registered Agen	t: Name and	Name and Address of New Registered Agent:			
The above	HWY 98 N D, FL 33809 named entity:	US submits this statement for	the purpose of changing	its registered	office or registered agent,	or both,	
in the State	e of Florida.						
SIGNATU							
	Electror	nic Signature of Registered	l Agent		Date		
Election Car	npaign Financin	g Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	V (X CRAMER, TIMO 5606 LORRAIN LAKELAND, FL	IE STREET	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zin:	P () CRAMER, JAM 5606 LORRAIN LAKELAND, EL	IE ST	Title: Name: Address: City-St-Zin:	P (CRAMER, JAI PO BOX 405 KATHI FEN F			

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: JAMES R. CRAMER P 04/29/2008

(X) Delete

CRAMER, JAMES R II

16 COLLEGE STREET

BINGHAMTON, NY 13905

Title: Name:

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