

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000069221

Entity Name: KEISER TILE, INC.

FILED
Jan 20, 2005
Secretary of State

Current Principal Place of Business:

1234 FORSYTH DR.
NORTH FT. MYERS, FL 33903

New Principal Place of Business:

Current Mailing Address:

1234 FORSYTH DR.
NORTH FT. MYERS, FL 33903

New Mailing Address:

FEI Number: 71-0951061

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KEISER, SHARON L
1234 FORSYTH DR.
NORTH FT. MYERS, FL 33903 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: KEISER, SHARON L
Address: 1234 FORSYTH DR.
City-St-Zip: NORTH FT. MYERS, FL 33903

Title: V () Delete
Name: KEISER, ADRIAN
Address: 1234 FORSYTH DR.
City-St-Zip: NORTH FT. MYERS, FL 33903

Title: S (X) Delete
Name: HOSKINS, JAMES E
Address: 214 NE 9TH PLACE
City-St-Zip: CAPE CORAL, FL 33909

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SHARON L. KEISER

P

01/20/2005

Electronic Signature of Signing Officer or Director

Date