

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Aug 29, 2005 8:00 am
Secretary of State

08-29-2005 90146 002 ***158.75

DOCUMENT # P03000081696

1. Entity Name

LAVERTU'S CARPET & FLOORING, INC



Principal Place of Business

7440 S.E. MARICAMP RD.
OCALA FL 34472
US

Mailing Address

9 HEMLOCK RADIAL CIRCLE
OCALA FL 34472

2. Principal Place of Business

10571 SE 114 AVE

Suite, Apt. #, etc.

3. Mailing Address

P O Box 701

Suite, Apt. #, etc.

City & State

Candler

City & State

Florida

Zip

32111

Country

MARION

Zip

32111

Country

USA

4. FEI Number

05-0579298

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LAVERTU, LINDA M
9 HEMLOCK RADIAL CIRCLE
OCALA FL 34472

7. Name and Address of New Registered Agent

Name Linda Lavertu

Street Address (P.O. Box Number is Not Acceptable)

P.O. Box 701

10571 SE 114 AVE

City Candler

FL

Zip Code 32111

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

Linda Lavertu

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

8/23/05

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing **\$5.00** May Be
Trust Fund Contribution. ☐ Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete
NAME LAVERTU, MATTHEW L
STREET ADDRESS 9 HEMLOCK RADIAL CIRCLE
CITY-ST-ZIP Ocala FL 34472

TITLE T ☐ Delete
NAME LAVERTU, LINDA M
STREET ADDRESS 9 HEMLOCK RADIAL CIRCLE
CITY-ST-ZIP Ocala FL 34472

TITLE ☒ ☐ Delete
NAME MARCEL, Lavertu
STREET ADDRESS P O Box 701 / 10571 SE 114 AVE
CITY-ST-ZIP Candler FL 32111

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Linda M Lavertu

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/23/05 (352) 687-4125

Date

Daytime Phone #

We did not receive any notification of Renewal. This is a new company and we moved to new address. We paid fee to change address but it was apparently not done...

ATTACHMENT

57063877
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