


2005 FORT PROSS CORPORATION ANNUAL REPORT

Jan 24, 2005  
Secret

DOCUMENT # P03000106949  
 1. Entity Name  
 RANDY'S CERAMIC TILE, INC.



Principal Place of Business  
 1811 LAKE BUFFUM RD E  
 FT MEADE, FL 33841

Mailing Address  
 1811 LAKE BUFFUM RD E  
 FT MEADE, FL 33841



01192005 No Chg-P CR2E034 (10/03)

4. FEI Number  
 56-2404186

Applied For  
 Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent

BUMBALOUGH, RANDY  
 1811 LAKE BUFFUM RD E  
 FT MEADE, FL 33841

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when re-registering) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	BUMBALOUGH, RANDY
STREET ADDRESS	1811 LAKE BUFFUM RD E
CITY-ST-ZIP	FT MEADE, FL 33841
TITLE	D
NAME	BUMBALOUGH, DONNA
STREET ADDRESS	1811 LAKE BUFFUM RD E
CITY-ST-ZIP	FT MEADE, FL 33841
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

U00000191611  
01/24/05-80180-015 150.00

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: Donna Bumbalough 1-20-05 863 285-6366

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #