

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000110316

Entity Name: EXPRESS MARBLE & TILE, INC.

FILED  
Apr 27, 2009  
Secretary of State

## Current Principal Place of Business:

5269 TIMUCUA CIRCLE  
ST. AUGUSTINE, FL 32086

## New Principal Place of Business:

160 CAPTAINS POINT CIRCLE  
ST. AUGUSTINE, FL 32086

## Current Mailing Address:

5269 TIMUCUA CIRCLE  
ST. AUGUSTINE, FL 32086

## New Mailing Address:

P.O. BOX 861058  
ST. AUGUSTINE, FL 32086

FEI Number: 65-1204922

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

EDWARDS, DAVID L  
5269 TIMUCUA CIRCLE  
ST. AUGUSTINE, FL 32086 US

## Name and Address of New Registered Agent:

EDWARDS, DAVID L  
160 CAPTAINS POINT CIRCLE  
ST. AUGUSTINE, FL 32086 US

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: DAVID L EDWARDS

04/27/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: EDWARDS, DAVID L  
Address: 5269 TIMUCUA CIRCLE  
City-St-Zip: SAINT AUGUSTINE, FL 32086

Title: ST (X) Delete  
Name: EDWARDS, MONICA  
Address: 5269 TIMUCUA CIRCLE  
City-St-Zip: SAINT AUGUSTINE, FL 32086

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: EDWARDS, DAVID L  
Address: P.O. BOX 861058  
City-St-Zip: SAINT AUGUSTINE, FL 32086

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

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.

SIGNATURE: DAVID L EDWARDS

P

04/27/2009

Electronic Signature of Signing Officer or Director

Date