

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000120940

FILED  
Apr 30, 2008  
Secretary of State

Entity Name: ROMAN'S FLOOR COVERING, INC.

## Current Principal Place of Business:

9541 NEAL DR.  
JACKSONVILLE, FL 32257

## New Principal Place of Business:

85161 MADELINE RD.  
YULEE, FL 32097

## Current Mailing Address:

9541 NEAL DR.  
JACKSONVILLE, FL 32257

## New Mailing Address:

85161 MADELINE RD.  
YULEE, FL 32097

FEI Number: 20-0341296

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ROMAN, WILLARD D  
9541 NEAL DR.  
JACKSONVILLE, FL 32257 US

## Name and Address of New Registered Agent:

ROMAN, WILLARD D  
85161 MADELINE RD.  
YULEE, FL 32097 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: WILLARD D. ROMAN

04/30/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: ROMAN, WILLARD D  
Address: 9541 NEAL DR.  
City-St-Zip: JACKSONVILLE, FL 32257

Title: S ( ) Delete  
Name: HARRIS, BRYAN  
Address: 9541 NEAL DR.  
City-St-Zip: JACKSONVILLE, FL 32257

Title: T ( ) Delete  
Name: ROMAN, MICHAEL J  
Address: 6631 PITTS ROAD  
City-St-Zip: JACKSONVILLE, FL 32219

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: ROMAN, WILLARD D  
Address: 85161 MADELINE RD.  
City-St-Zip: YULEE, FL 32097

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 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: MICHAEL J.ROMAN

OFF.

04/30/2008

Electronic Signature of Signing Officer or Director

Date