

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000128998

FILED
Jan 18, 2005
Secretary of State

Entity Name: SARASOTA CUSTOM TILE, INC.

Current Principal Place of Business:

5123 CEDAR HAMMOCK DR.
SARASOTA, FL 34232

New Principal Place of Business:

4522 8TH ST. CT. E.
ELLENTON, FL 34222

Current Mailing Address:

5123 CEDAR HAMMOCK DR.
SARASOTA, FL 34232

New Mailing Address:

4522 8TH ST. CT. E.
ELLENTON, FL 34222

FEI Number: 11-3708202

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DANIEL L. PREWETT
5777 BENEVA ROAD SOUTH
SARASOTA, FL 34233 US

Name and Address of New Registered Agent:

AVINS, JULIE I
4522 8TH ST. CT. E.
ELLENTON, FL 34222 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: JULIE I. AVINS

01/18/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: AVINS, LARRY D JR.
Address: 5123 CEDAR HAMMOCK DR.
City-St-Zip: SARASOTA, FL 34232

Title: PD () Delete
Name: AVINS, JULIE I
Address: 5123 CEDAR HAMMOCK DR.
City-St-Zip: SARASOTA, FL 34232

Title: T () Delete
Name: LARRY, AVINS D JR.
Address: 5123 CEDAR HAMMOCK DRIVE
City-St-Zip: SARASOTA, FL 34232

Title: S () Delete
Name: AVINS, JULIE I
Address: 5123 CEDAR HAMMOCK DRIVE
City-St-Zip: SARASOTA, FL 34232

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: AVINS, LARRY D JR.
Address: 5123 CEDAR HAMMOCK DR.
City-St-Zip: SARASOTA, FL 34232

Title: VP (X) Change () Addition
Name: AVINS, JULIE I
Address: 5123 CEDAR HAMMOCK DR.
City-St-Zip: SARASOTA, FL 34232

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: JULIE I. AVINS

VP

01/18/2005

Electronic Signature of Signing Officer or Director

Date