


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2005 08:00 AM
Secretary of State

DOCUMENT # P03000129424 1. Entity Name JIMMY MARSH FLOORING, INC.	
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Principal Place of Business 2430 LONGWOOD STREET ORANGE PARK, FL 32065 US	Mailing Address 2430 LONGWOOD STREET ORANGE PARK, FL 32065 US
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04252005 No Chg-P CR2E034 (10/03)

4. FEI Number 20-0367284	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent CONNER, STEVEN W 1106 PARK AVENUE ORANGE PARK, FL 32073

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 _____ DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY ST ZIP	P MARSH, JIMMY 2430 LONGWOOD STREET ORANGE PARK, FL 32065
TITLE NAME STREET ADDRESS CITY ST ZIP	VP MARSH, JIMMY 2430 LONGWOOD STREET ORANGE PARK, FL 32065
TITLE NAME STREET ADDRESS CITY ST ZIP	SEC MARSH, SHARON 2430 LONGWOOD STREET ORANGE PARK, FL 32065
TITLE NAME STREET ADDRESS CITY ST ZIP	TRE MARSH, SHARON 2430 LONGWOOD STREET ORANGE PARK, FL 32065
TITLE NAME STREET ADDRESS CITY ST ZIP	
TITLE NAME STREET ADDRESS CITY ST ZIP	

DO NOT WRITE IN THIS SPACE

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04/27/05-80122-002 150.00

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: Sharon M. Marsh Sharon M. Marsh 4-25-05 904-276-2274
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR