

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000131974

Entity Name: MCCALDEN FLOORING, INC.

FILED
Oct 09, 2006
Secretary of State

Current Principal Place of Business:

2203 NW 23RD STREET
CAPE CORAL, FL 33993 US

New Principal Place of Business:

Current Mailing Address:

2203 NW 23RD STREET
CAPE CORAL, FL 33993 US

New Mailing Address:

FEI Number: 92-0199334 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCALDEN, WILLIAM H
2203 NW 23RD STREET
CAPE CORAL, FL 33993 US

Name and Address of New Registered Agent:

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: WILLIAM MCCALDEN

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MCCALDEN, WILLIAM H
Address: 2203 NW 23RD STREET
City-St-Zip: CAPE CORAL, FL 33993 US

Title: VP (X) Delete
Name: GEYER, JAMES K
Address: 434 STOCKMAN STREET
City-St-Zip: NORTH FORT MYERS, FL 33903 US

Title: S/T (X) Delete
Name: GEYER, JEREMY K
Address: 2315 SE 12TH STREET
City-St-Zip: CAPE CORAL, FL 33990 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change () Addition
Name: MCCALDEN, WILLIAM H
Address: 2203 NW 23 ST
City-St-Zip: CAPE CORAL, FL 33993

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 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: WILLIAM MCCALDEN

Electronic Signature of Signing Officer or Director

PRES

10/09/2006

Date