

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000132743

FILED
Apr 30, 2004
Secretary of State

Entity Name: AMH HARDWOOD FLOORING INC.

Current Principal Place of Business:

1158 NATIVE DANCER CT
JACKSONVILLE, FL 32218 US

New Principal Place of Business:

5781 HECKSCHER DR
JACKSONVILLE, FL 32226 US

Current Mailing Address:

1158 NATIVE DANCER CT
JACKSONVILLE, FL 32218 US

New Mailing Address:

5781 HECKSCHER DR
JACKSONVILLE, FL 32226 US

FEI Number: 20-0399048

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOFFER, ARRON M
1158 NATIVE DANCER CT
JACKSONVILLE, FL 32218 US

Name and Address of New Registered Agent:

HOFFER, ARRON M
5781 HECKSCHER DR
JACKSONVILLE, FL 32226 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:

04/30/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HOFFER, ARRON M
Address: 1158 NATIVE DANCER CT
City-St-Zip: JACKSONVILLE, FL 32218 US

Title: V () Delete
Name: STAFFORD, TOBY R
Address: 10649 WAKEFIELD FOREST AVE
City-St-Zip: JACKSONVILLE, FL 32218 US

Title: V () Delete
Name: STAFFORD, TYLER P
Address: 4948 SCENIC MARSH CT
City-St-Zip: JACKSONVILLE, FL 32218 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HOFFER, ARRON M
Address: 5781 HECKSCHER DR
City-St-Zip: JACKSONVILLE, FL 32226 US

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: ARRON M HOFFER

P

04/30/2004

Electronic Signature of Signing Officer or Director

Date