


2004 FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 08, 2004 8:00 am
Secretary of State

07-08-2004 90101 046 ***158.75

DOCUMENT # P03000139863			
1. Entity Name TNS FLOORING INC.			
Principal Place of Business 1413 NE 14TH STREET OCALA, FL 34470		Mailing Address 1413 NE 14TH STREET OCALA, FL 34470	
2. Principal Place of Business 1413 NE 17th Street		3. Mailing Address 1413 NE 17th Street	
Suite, Apt. #, etc. Ocala Florida		Suite, Apt. #, etc. Ocala Florida	
City & State 34470		City & State Ocala Florida	
Zip USA		Zip 34470 Country USA	
6. Name and Address of Current Registered Agent PLUMLEY, SHELIA 1413 NE 14TH STREET OCALA, FL 34470		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 1413 NE 17th Street City Ocala FL Zip Code 34470	
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____			
FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PLUMLEY, THOMAS 1413 NE 14TH STREET OCALA, FL 34470 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Thomas Plumley 1413 NE 17 th Street Ocala FL 34470 <input type="checkbox"/> Change <input type="checkbox"/> Addition Correction
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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: <i>Shelia Plumley</i>		Date: <i>7/6/04</i> Daytime Phone #: <i>(352)351-5509</i>	

54060669



07062004 Chg-P CR2E034 (10/03)

4. FEI Number **20-0429487** Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☒ **\$8.75** Additional Fee Required

Attachment

54060669

TNS Flooring

P03000139863



Specializing In Wood Repair
Installation Carpet, Wood, Vinyl, Tile
1413 NE 17th Street
Ocala, Florida 34470
(352) 351-5509

July 6, 2004

To whom it may concern:

TNS Flooring Inc. never received a notice for an annual report.

As you can see I have corrected the address on the form.

Please waive the penalty fees.

Thank you,

Sheila Plumley

Sheila Plumley