2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000142215

1. Entity Name
SIMMONS TILE, INC.

Principal Place of Business	Mailing Address
8431 NE 78 LANE	8431 NE 78 LANE
GAINESVILLE, FL 32609	GAINESVILLE, FL 32609

DO NOT WRITE IN THIS SPACE

01222007   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
20-0404126	Not Applicable

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

6. Name and Address of Current Registered Agent

STORMANT, JOHN
4232 NW 6TH ST
SUITE A-1
GAINESVILLE, FL 32609

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 _John F. Stormant_

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)   DATE 2/12/07

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

000000644777
03/02/07-80057-023 150.00

10.   OFFICERS AND DIRECTORS

TITLE	D
NAME	SIMMONS, DANIEL
STREET ADDRESS	8430 NE 78 LANE
CITY-ST-ZIP	GAINESVILLE, FL 32609

TITLE	D
NAME	SIMMONS, ELIZABETH
STREET ADDRESS	8430 NE 78 LANE
CITY-ST-ZIP	GAINESVILLE, FL 32609

TITLE	D
NAME	CARNEY, SHAWN
STREET ADDRESS	110 NW 39 AVE APT 114B
CITY-ST-ZIP	GAINESVILLE, FL 32609

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
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TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 _Daniel E. Simmons_   2/13/07 (352)372-1646

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #