2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000145333

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FILED Mar 19, 2008 Secretary of State

Entity Name: KEPHART'S CUSTOM FLOOR COVERING, INC.	
Current Principal Place of Business:	New Principal Place of Business:
297 SW AMELIA CT FT WHITE, FL 32038	910 SW SISTERS WELCOME RD 100 LAKE CITY, FL 32025
Current Mailing Address:	New Mailing Address:
297 SW AMELIA CT FT WHITE, FL 32038	
FEI Number: 61-1460598 FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired (X)
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
KEPHART, KENNETH K 297 SW AMELIA CT FT WHITE, FL 32038 US	
The above named entity submits this statement for the pin the State of Florida.	surpose of changing its registered office or registered agent, or both,
SIGNATURE:	
Electronic Signature of Registered Age	ent Date
Election Campaign Financing Trust Fund Contribution ().	
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

Title: () Delete Title: (X) Change () Addition KEPHART, KENNETH K KEPHART, KENNETH K PRES Name: Name: 297 SW AMELIA CT 297 SW AMELIA CT Address: Address: City-St-Zip: FT WHITE, FL 32038 City-St-Zip: FT WHITE, FL 32038 Title: () Delete Title: (X) Change () Addition PORTER, MATTHEW G KEPHART, BARBIE J VPRES Name: Name: Address: Address: 698 SW BRANDYWINE DR # 101 297 SW AMELIA COURT

FORT WHITE, FL 32038 LAKE CITY, FL 32055 City-St-Zip: City-St-Zip:

Title: Title: (X) Change () Addition () Delete Name: WARD-REPHART, BARBIE J Name: PORTER, MATTHEW G Address: 297 SW AMELIA CT. Address: 312 SW ZEBRA TERRACE. City-St-Zip: FORT WHITE, FL 32038 City-St-Zip: LAKE CITY, FL 32025

I hereby certify that the information supplied with this filing does not qualify 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: VPRS/BARBIE KEPHART 03/19/2008 ٧