## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000150694

Entity Name: VOLKMANN TILE CONCEPTS INC

FILED Apr 16, 2008 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business: |
|--------------------------------------|----------------------------------|
|--------------------------------------|----------------------------------|

3 PINE RIDGE TRACE DESTIN, FL 32541 US

Current Mailing Address: New Mailing Address:

3 PINE RIDGE TRACE 610 PINE CONE COURT DESTIN, FL 32541 US MARY ESTHER, FL 32569 US

FEI Number: 20-0473003 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

STECKLEIN, MONIQUE M CPA
367 OSBORNE DR NE
FORT WALTON BEACH, FL 32548 US
ALL FLORIDA FIRM, INC.
813 DELTONA BLVD
STE A
DELTONA, FL 32725 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: JACKIE SMITH RA 04/16/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 VOLKMAN, RUSSELL L
 Name:

 Address:
 3 PINE RIDGE TRACE
 Address:

 City-St-Zip:
 DESTIN, FL 32541 US
 City-St-Zip:

Title: VP (X) Delete Title: ( ) Change ( ) Addition

 Name:
 LAU, JON J
 Name:

 Address:
 64 CROSS CREEK ROAD UNIT 28
 Address:

 City-St-Zip:
 MIRAMAR BCH, FL 32550 US
 City-St-Zip:

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: JACKIE SMITH WITH ALL FLORIDA FIRM, INC. RA 04/16/2008