2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000016813

Entity Name: DE COFFIN CERAMIC TILE INC

FILED Apr 24, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 6707 90TH STREET EAST BRADENTON, FL 34202 US **Current Mailing Address: New Mailing Address:** 6707 90TH STREET EAST BRADENTON, FL 34202 US FEI Number: 20-0605183 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: COFFIN, DAVID E 6707 90TH STREET EAST BRADENTON, FL 34202 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition COFFIN, DAVID E Name: Name: 6707 90TH STREET EAST Address: Address: City-St-Zip: BRADENTON, FL 34202 US City-St-Zip: () Delete Title: VΡ Title: () Change () Addition Name: COFFIN. CHARLA Name: 6707 90TH STREET EAST Address: Address: BRADENTON, FL 34202 US City-St-Zip: City-St-Zip: Title: Title: VP. () Delete () Change () Addition COFFIN, EVA T Name: Name: 10833 PINEWOOD CIR Address: Address: City-St-Zip: BRADENTON, FL 34211 US City-St-Zip: Title: () Delete Title: () Change () Addition COFFIN, NICK Name: Name: Address: 6707 WILLOW LANE Address: City-St-Zip: BRADENTON, FL 34202 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: CHARI COFFIN VP 04/24/2007