2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

May 10, 2006 8:00 am Secretary of State **DOCUMENT # P04000024331** 05-10-2006 90103 041 ***150.00 JEFF HARRISON FLOOR COVERING, INC. Principal Place of Business Mailing Address 3429 LAURA STREET TALLAHASSEE FL 32305 **UUU3/36U** 3429 LAURA STREET TALLAHASSEE FL 32305 3. Mailing Address 2. Principal Place of Business 3435 Laura St Suite, Apt. #, etc. 3435 Laura St 1st MOORE CR2E034 (10/05) allahassee City & State Applied For 4. FEI Number 90-0141466 Tallahassee Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 32 Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent <u>Harrison</u> Jeffre HARRISON, JEFFREY reet Address (P.O. Box Number is Not Acceptable) 3429 LAURA STREET TALLAHASSEE FL 32305 Zip Code Ta'llahassee 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, typed or printed name of registered agent and tale it applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150,00 . 9. Election Campaign Financing \$5.00 May Be After May 1, 2006 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. Proposed Coror TIFLE ☐ Delete TITLE ☐ Change NAME HARRISON, JEFFREY NAME STREET ADDRESS 3429 LAURA STREET STREET ADDRESS CITY-ST-ZIP TALLAHASSEE FL 32305 CITY-ST-ZIP Delete TITLE ☐ Chance Addition BARRETT, DAVID NAME NAME Randall Car STREET ADDRESS 3429 LAURA STREET STREET ADDRESS 3426 Laurast. CITY-ST-7IP CITY-ST-ZIP TALLAHASSEE FL 32305 Tallahassee Fl 3230F Dalete TITLE шц - 🔲 Change □ Addition NAME NAME HANCOCK, ROBBY STREET ADDRESS STREET ADDRESS 95 STUART COVE RD CHTY-ST-ZIP CITY-ST-ZIP CRAWFORDVILLE FL 32327 TITLE ☐ Defete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CHY-ST-7IP CITY - ST- 7/P TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete □ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.

CITY - ST - ZIP

SIGNING OFFICER OR DIRECTOR

CITY-ST-7IP

4-4-06 850-210-7810

FILED

ATTACHMENT # POY00024331
5-4-06

	To whom it may concern:
	My name is Jeff Harrison and my
·····	family and I just returned from being
	Out or town on 5-3-06. I am writing this
	letter because I was late mailing
	my annual report. Work has been Flowing
	and time has slipped by. I have not been
	kte before this is the First and will
····-	be the last. I am mailing this letter
	the pext day.
O -	Thank you,
	Jeffry Harrison
	Home 850-878-2817
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