

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 02, 2007 8:00 am
Secretary of State

05-02-2007 90039 010 ***150.00

DOCUMENT # P04000024331

1. Entity Name

JEFF HARRISON FLOOR COVERING, INC.



Principal Place of Business

Mailing Address

3435 LAURA ST
TALLAHASSEE FL 32305

3429 3435 LAURA ST
TALLAHASSEE FL 32305



2. Principal Place of Business - No P.O. Box #

3432 Zillah St.

3. Mailing Address

3432 Zillah St.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1st MOORE

CR2E034 (10/06)

City & State

Tallahassee FL

City & State

Tallahassee FL

4. FEI Number

90-0141466

Applied For

Not Applicable

Zip

32305

Country

US

Zip

32305

Country

US

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HARRISON, JEFFREY
3435 LAURA ST 3429
TALLAHASSEE FL 32305

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2007 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME HARRISON, JEFFREY ☐ Delete
STREET ADDRESS 3429 LAURA STREET
CITY-ST-ZIP TALLAHASSEE FL 32305

TITLE OVP ☒ Change ☐ Addition
NAME Carr, Randall
STREET ADDRESS 3426 Laura St.
CITY-ST-ZIP Tallahassee FL 32305

TITLE VP ☒ Delete
NAME BARRETT, DAVID
STREET ADDRESS 3429 LAURA STREET
CITY-ST-ZIP TALLAHASSEE FL 32305

TITLE ☐ Change ☐ Addition
NAME Harrison, Jeffrey
STREET ADDRESS
CITY-ST-ZIP

TITLE V ☐ Delete
NAME CAR, RANDALL
STREET ADDRESS 3426 LAURA ST
CITY-ST-ZIP TALLAHASSEE FL 32305

TITLE V ☐ Change ☒ Addition
NAME Heatherly, William
STREET ADDRESS 3429 Laura St.
CITY-ST-ZIP Tallahassee FL 32305

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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.

SIGNATURE:

Jeffrey Harrison
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-24-07 (850) 210-7810
Date Daytime Phone #