

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000034233

FILED
Sep 16, 2009
Secretary of State

Entity Name: NATIVE FLOOR COVERING, INC.

Current Principal Place of Business:

6962 BELLGRAVE DR.
SARASOTA, FL 34242 US

New Principal Place of Business:

2716 DUEBY STREET
SARASOTA, FL 34231 US

Current Mailing Address:

6962 BELLGRAVE DR.
SARASOTA, FL 34242 US

New Mailing Address:

2716 DUEBY STREET
SARASOTA, FL 34231 US

FEI Number: 20-0762368

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ATCHLEY, BILLY
6962 BELLGRAVE DR.
SARASOTA, FL 34242 US

Name and Address of New Registered Agent:

ATCHLEY, BILLY
2716 DUEBY STREET
SARASOTA, FL 34231 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:

09/16/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ATCHLEY, BILLY
Address: 6962 BELLGRAVE DR.
City-St-Zip: SARASOTA, FL 34242 US

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ATCHLEY, BILLY
Address: 2716 DUEBY STREET
City-St-Zip: SARASOTA, FL 34231 US

Title: VP () Change (X) Addition
Name: MASCOLINO, CHUCK
Address: 2716 DUEBY STREET
City-St-Zip: SARASOTA, FL 34231

Title: SEC () Change (X) Addition
Name: EDWARDS, KENNY
Address: 407 PENNSYLVANIA AVENUE
City-St-Zip: OSPRY, FL 34229

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: BILLY ATCHLEY

P

09/16/2009

Electronic Signature of Signing Officer or Director

Date