

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000048589

Entity Name: WASHBURN TILE INC.

FILED
Oct 27, 2006
Secretary of State

Current Principal Place of Business:

466 WARD RD., SW
PALM BAY, FL 32908

New Principal Place of Business:

Current Mailing Address:

466 WARD RD., SW
PALM BAY, FL 32908

New Mailing Address:

FEI Number: 83-0388758

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WASHBURN, PAM
466 WARD RD., SW
PALM BAY, FL 32908 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: D,P, () Delete
Name: WASHBURN, PAM
Address: 466 WARD RD., SW
City-St-Zip: PALM BAY, FL 32908

Title: D, S () Delete
Name: ROGERS, WILLIAM R III
Address: 466 WARD RD SW
City-St-Zip: PALM BAY, FL 32908

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: WEATHERS, TROY M
Address: 466 WARD RD SW
City-St-Zip: PALM BAY, FL 32908

I hereby certify that the information supplied with this filing does not qualify for the 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: PAM WASHBURN

D,P

10/27/2006

Electronic Signature of Signing Officer or Director

Date