

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000050806

Entity Name: XTREME TILE BY TODD, INC.

**FILED**  
**Apr 25, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

261 NE CATTAIL DR  
MADISON, FL 32340

**New Principal Place of Business:**

**Current Mailing Address:**

261 NE CATTAIL DR  
MADISON, FL 32340

**New Mailing Address:**

FEI Number: 57-1201642

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

WHITAKER, TODD M  
261 NE CATTAIL DR  
MADISON, FL 32340 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: P  
Name: WHITAKER, SABRINA  
Address: 261 NE CATTAIL DR  
City-St-Zip: MADISON, FL 32340

Title: VST  
Name: WHITAKER, TODD M  
Address: 261 NE CATTAIL DR  
City-St-Zip: MADISON, FL 32340

Title: V  
Name: WHITAKER, JACOB  
Address: 261 NE CATTAIL DR  
City-St-Zip: MADISON, FL 32340

I hereby 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 all other like empowered.

SIGNATURE: SABRINA WHITAKER

P

04/25/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date