

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 21, 2007 08:00 A
Secretary of State

DOCUMENT # P04000068792

1. Entity Name
C.J. CUSTOM FLOORS, INCORPORATED



Principal Place of Business
**2130 LAKE DRIVE
WINTER PARK, FL 32789**

Mailing Address
**2130 LAKE DRIVE
WINTER PARK, FL 32789**



05042007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
26-0085057

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**SMITH, GARY J
8507 FOREST CITY ROAD
ORLANDO, FL 32810**

**DO NOT WRITE
IN THIS SPACE**

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
Due by September 14, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
NECRASON, CONRAD J
2130 LAKE DRIVE
WINTER PARK, FL 32789**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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U000000764548
05/30/07-80066-025 150.00

**DO NOT WRITE
IN THIS SPACE**

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

Conrad J. Necrason
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/14/07
Date

Deadline Phone #