2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 20, 2005 8:00 am Secretary of State 04-20-2005 90360 037 ***150.00

4/18/05

Daytime Phone #

Date

DOCUMENT # P04000084873 1. Entity Name ZIMMERMAN TILE, INC.				04-20-2005 90360 037 ***150.00			
Principal Place 2210 BENEV SARASOTA, I		Mailing Address 2210 BENEVA RD SARASOTA, FL 34232	US		5 (04120	
JAMASOTA, I	11 34232 03	3/10/30 TA, TE 34232	03	 			
2. Principal Place of Business 3.		3. Mailing Address	3. Mailing Address				
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04152005 Chg-P	CR2E034 (10/03)		
City & State		City & State		4. FEI Number 20-1178213	} -	plied For	
Zip	Country	Zip	Country	5. Certificate of Status Desired	\$8.75 Add	itional	
	6. Name and Address of Currer	nt Registered Agent	i	7. Name and Address of New R			
		MMERMAN, MARY					
BAKER, MICHAEL L 5702 CLARK ROAD				ess (P.O. Box Number is Not Acceptable	r)		
SARASOTA, FL 34233			221	0 BENEVA RD		***************************************	
	` }			RASOTA	FL Zip Code		
8. The above the obligat	a named entity submits this statement tions of registered agent.	for the purpose of changing its r	egistered office or req	pistered agent, or both, in the State of Flo	rida. I am familiar with,	and accept	
SIGNATURE.			ZIMMERMA		4/18/05		
	Signitiare, typud or printed haine of registered age	rit and title if applicable. (NOTE:	Registered Agent signature re	quired when (einstating)	DAIF		
	.E NOW!!! FEE IS \$150.00 lay 1, 2005 Fee will be \$550	9. Election Campaig Trust Fund Contri		\$5.00 May Be Added to Fees			
10.	OFFICERS AN	D DIRECTORS	11.	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTOR	S IN 11	
MAME STREET ADDRESS CHY-SI-ZIP	PSTD ZIMMERMAN, MARY 2210 BENEVA RD SARASOTA, FL 34232	☐ Deleţe	TITLE NAME STREET ADDRESS CITY-S1-ZIP		☐ Change	☐ Addition	
TITLE HAME STREET ADDRESS GITY-ST-ZIP	VPD ZIMMERMAN, GEORGE C 2210 BENEVA RD SARASOTA, FL 34232	☐ Delete	TITLE NAME STREET ADDRESS CITY-SI-ZIP		☐ Change	Addation	
TITLE NAME	SD ZIMMERMAN, GEORGE C JR.	☐ Delete	TITLE NAME		☐ Change	Addition	
STHEET ADDRESS CITY-ST-ZIP	SARASOTA, FL 34232		CITY-ST-ZIP				
MILE NAME STREET ADDRESS		☐ Delete	HILE NAME STREET ADDRESS		☐ Change	☐ Addition	
TITLE HAME		☐ Delete	TITLE NAME		Change	Addition	
STHLET ADDRESS CITY-\$1-ZIP			STRLET ADDRESS CRIY+ST-ZIP		•		
NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	☐ Addition	

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). 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.

MARY ZIMMERMAN

D OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: MOUL

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