## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000085831

Entity Name: TILE WITH STYLE & ASSOCIATES INC.

FILED Apr 24, 2008 Secretary of State

Littly Na	ille. TILE VVII	HOTTLE & ASSOCIATES, IN	O.		
Current Principal Place of Business:			New Principal Pl	New Principal Place of Business:	
777 DELTONA BLVD. SUITE 16 DELTONA, FL 32725				897 GLASGOW AVENUE DELTONA, FL 32728	
			,,	. —	
Current M	lailing Addre	ss:	New Mailing Add	New Mailing Address:	
777 DELTONA BLVD. SUITE 16 DELTONA, FL 32725			897 GLASGOW AVENUE DELTONA, FL 32728		
FEI Number	: 27-0092820	FEI Number Applied For ( )	FEI Number Not Applicable (	) Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Addre	Name and Address of New Registered Agent:	
DELTONA  The above	GOW AVENU A, FL 32738	US	purpose of changing its regis	tered office or registered agent, or both,	
SIGNATU	RE:				
	Electro	nic Signature of Registered Ag	ent	Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHA	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	BAKER, STEV 897 GLASGOV	V AVENUE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VP ( REPASS, APR 897 GLASGOV DELTONA, FL	V AVENUE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

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: APRIL REPASS V.P. 04/24/2008