FILED
Jul 18, 2005 8:00 am
Secretary of State
06-21-2005 90004 017 ***150.00

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000119888

1. Entity Name
C & C FLOORING OF BERVARD, INC.

66024769

Principal Place of Business	Mailing Address
1090 SPARKMAN ST MELBOURNE, FL 32935	1090 SPARKMAN ST MELBOURNE, FL 32935

05162005 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
2042 Mobiland Dr	2042 Mobiland Dr
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Melbourne FL	City & State: Melbourne FL
Zip: 32935 Country: USA	Zip: 32935 Country: USA

4. FEI Number 20-1510530 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent
BYRD-BOYLE, CHERYL A
1090 SPARKMAN ST
MELBOURNE, FL 32935

7. Name and Address of New Registered Agent
Name: Cheryl Lesher
Street Address (P.O. Box Number is Not Acceptable): 2042 Mobiland Dr
City: Melbourne FL Zip Code: 32935

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: Cheryl A Lesher Cheryl Lesher Reg Agent 5/17/05
(NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
Due by September 7, 2005

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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BYRD-BOYLE, CHERYL A 1090 SPARKMAN ST MELBOURNE, FL 32935 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DPST Lesher Cheryl 1090 Sparkman St. Melbourne FL 32935 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LESHER, CHRISTOPHER 1090 SPARKMAN ST MELBOURNE, FL 32935 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DVP Lesher Christopher 1090 Sparkman St. Melbourne FL 32935 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing 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.

SIGNATURE: Cheryl A Lesher Cheryl Lesher Pres 5/17/05 (321)
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Cheryl A Lesher 6-9-05