2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000124562

Entity Name: GATOR CARPET ONE INC

FILED Apr 10, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2115 SOUTH RIDGEWOOD AVE. 2115 SOUTH RIDGEWOOD AVE. EDGEWATER, FL 32141 EDGEWATER, FL 32141 **Current Mailing Address: New Mailing Address:** 2115 SOUTH RIDGEWOOD AVE. 2115 SOUTH RIDGEWOOD AVE. EDGEWATER, FL 32141 EDGEWATER, FL 32141 FEI Number: 84-1656295 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CONATSER, FREDDIE M 3208 SEQUÓIA DR. PORT ORANGE, FL 32127 US 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 Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition Title: () Delete Title: CONATSER, JOEY CONATSER, DONALD J OWNER Name: Name: 6188 SEGUOIA DR. 6208SEGUOIA DR. Address: Address: PORT ORANGE, FL 32127 City-St-Zip: PORT ORANGE, FL 32127 City-St-Zip: Title: Title: () Delete (X) Change () Addition Name: CONATSER, DONALD J Name: CONATSER, DONALD J JR 6208 SEGUOIA DRIVE 6208 SEGUOIA DRIVE Address: Address: PORT ORANGE, FL 32127 PORT ORANGE, FL 32127 City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition CONATSER, FREDDIE M Name: Name: 6208 SEGUOIA DRIVE Address: Address: City-St-Zip: PORT ORANGE, FL 32127 City-St-Zip:

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: DONALD CONATSER OWNE 04/10/2009