

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000127025

FILED
Jan 12, 2009
Secretary of State

Entity Name: SOUTH WALTON FLOORING OUTLET, INC.

Current Principal Place of Business:

184 LYNN DRIVE
SANTA ROSA BEACH, FL 32459

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2433
SANTA ROSA BEACH, FL 32459

New Mailing Address:

P.O. BOX 2433
SANTA ROSA BEACH, FL 32459

FEI Number: 20-1599688

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOSSETT, KIM P
129 WRIGHT CIRCLE
NICEVILLE, FL 32578 US

Name and Address of New Registered Agent:

GOSSETT, KIM P PST
129 WRIGHT CIRCLE
NICEVILLE, FL 32578 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: KIM P. GOSSETT

01/12/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: GOSSETT, KIM P
Address: 129 WRIGHT CIRCLE
City-St-Zip: NICEVILLE, FL 32578 US

Title: VD () Delete
Name: GOSSETT, TIMOTHY D
Address: 129 WRIGHT CIRCLE
City-St-Zip: NICEVILLE, FL 32578 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change () Addition
Name: GOSSETT, KIM P
Address: 129 WRIGHT CIRCLE
City-St-Zip: NICEVILLE, FL 32578 US

Title: VP (X) Change () Addition
Name: GOSSETT, TIMOTHY D
Address: 129 WRIGHT CIRCLE
City-St-Zip: NICEVILLE, FL 32578 US

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: KIM P. GOSSETT

PST

01/12/2009

Electronic Signature of Signing Officer or Director

Date