2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2006
Secretary of State

DOCUMENT# P05000073243

Entity Name: A & M FLOORING ENTERPRISES, INC.

Current Principal Place of Business:

1320 HAND AVENUE
LOT #1
ORMOND BEACH, FL 32174

New Principal Place of Business:

1409 AVE C
ORMOND BEACH, FL 32174

Current Mailing Address:

1320 HAND AVENUE
LOT #1
ORMOND BEACH, FL 32174

New Mailing Address:

1409 AVE C
ORMOND BEACH, FL 32174

FEI Number: 20-2882645 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

DEES, MICHAEL C
1320 HAND AVENUE
LOT #1
ORMOND BEACH, FL 32174 US

Name and Address of New Registered Agent:

GOODWIN, ANTHONY D
1409 AVE C
ORMOND BEACH, FL 32174 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: ANTHONY D. GOODWIN 04/27/2006
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: DEES, MICHAEL C
Address: 1320 HAND AVENUE, LOT #1
City-St-Zip: ORMOND BEACH, FL 32174

Title: V ( ) Delete
Name: GOODWIN, ANTHONY D
Address: 1202 RIDGEWOOD AVENUE, APT. #253
City-St-Zip: HOLLY HILL, FL 32117

Title: T ( ) Delete
Name: DEES, ASHLEY A
Address: 1320 HAND AVENUE, LOT #1
City-St-Zip: ORMOND BEACH, FL 32174

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: GOODWIN, ANTHONY D
Address: 1409 AVE C
City-St-Zip: ORMOND BEACH, FL 32174

Title: V (X) Change ( ) Addition
Name: GOODWIN, JESSE M
Address: 36 RIVERSHORE DR.
City-St-Zip: ORMOND BEACH, FL 32176

Title: T (X) Change ( ) Addition
Name: BARBIERI, JAQUELYN L
Address: 1409 AVE C
City-St-Zip: ORMOND BEACH, FL 32174

I hereby certify that the information supplied with this filing does not qualify for the 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: ANTHONY D. GOODWIN P 04/27/2006
Electronic Signature of Signing Officer or Director Date