

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 12, 2007 8:00 am
Secretary of State

09-12-2007 90002 031 ***150.00

DOCUMENT # P05000090346					
1. Entity Name J & C CUSTOM FLOORING, INC.					
Principal Place of Business 600 EAST CANFIELD STREET APT 629 AVON PARK, FL 33825			Mailing Address 600 EAST CANFIELD STREET APT 629 AVON PARK, FL 33825		
2. Principal Place of Business - No P.O. Box # 1317 N. OAKRIDGE DR Suite, Apt. #, etc. Lorida FL		3. Mailing Address 7317 N OAKRIDGE DR Suite, Apt. #, etc. Lorida FL			
City & State 33857		City & State Lorida FL		05192007 Chg-P CR2E034 (12/06)	
Zip 33857		Country US		4. FEI Number 20-3062884	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For Not Applicable	
6. Name and Address of Current Registered Agent DONALDSON, DEVON P 120 SOUTH ANOKA AVENUE AVON PARK, FL 33825			7. Name and Address of New Registered Agent Name: Michelle M Caron Street Address (P.O. Box Number is Not Acceptable): 2266 Woods & Water Ct City: Sebring FL Zip Code: 33872		
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: DATE: 5-12-07 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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 P NAME CAUDILL, JOSHUA STREET ADDRESS 600 EAST CANFIELD STREET, APT. 629 CITY-ST-ZIP AVON PARK, FL 33825	<input type="checkbox"/> Delete		TITLE CAUDILL, Joshua NAME 307 Virginia Pl. STREET ADDRESS Sebring FL 33872 CITY-ST-ZIP 	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition ADDRESS	
TITLE VP NAME DYER, CORBIN JR. STREET ADDRESS 600 EAST CANFIELD STREET, APT. 629 CITY-ST-ZIP AVON PARK, FL 33825	<input type="checkbox"/> Delete		TITLE CORBIN Dyer JR NAME 6314 MATANZAS DR STREET ADDRESS Sebring FL 33870 CITY-ST-ZIP 	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition ADDRESS	
TITLE S NAME DYER, CORBIN STREET ADDRESS 600 EAST CANFIELD STREET, APT. 629 CITY-ST-ZIP AVON PARK, FL 33825	<input checked="" type="checkbox"/> Delete		TITLE Corbin Dyer NAME 1317 N. OAKRIDGE DR STREET ADDRESS Lorida FL 33857 CITY-ST-ZIP 	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:			9/6/07 (863) 443-7244		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date Daytime Phone #</small>		