

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000099543

Entity Name: GOODLY FLOORS CO.

FILED
Feb 09, 2008
Secretary of State

Current Principal Place of Business:

2728 PARROT STREET
NORTH PORT, FL 34286 US

New Principal Place of Business:

2841 YAMADA LANE
NORTH PORT, FL 34286 US

Current Mailing Address:

2728 PARROT STREET
NORTH PORT, FL 34286 US

New Mailing Address:

2841 YAMADA LANE
NORTH PORT, FL 34286 US

FEI Number: 20-3152829

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GUDNYY, LEONID
2728 PARROT STREET
NORTH PORT, FL 34286 US

Name and Address of New Registered Agent:

GUDNYY, LEONID
2841 YAMADA LANE
NORTH PORT, FL 34286 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: LEONID GUDNYY

02/09/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D,P () Delete
Name: GUDNYY, LEONID
Address: 2728 PARROT STREET
City-St-Zip: NORTH PORT, FL 34286 US

Title: D,VP () Delete
Name: GUDNYY, DMITRIY
Address: 2728 PARROT STREET
City-St-Zip: NORTH PORT, FL 34286 US

Title: D,S () Delete
Name: GUDNAYA, NINA
Address: 2728 PARROT STREET
City-St-Zip: NORTH PORT, FL 34286 US

Title: DS () Delete
Name: BELOUS, ANATOLIY
Address: 12120 CAPILLA LN
City-St-Zip: NORTH PORT, FL 34287

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D,P (X) Change () Addition
Name: GUDNYY, LEONID
Address: 2841 YAMADA LANE
City-St-Zip: NORTH PORT, FL 34286 US

Title: D,VP (X) Change () Addition
Name: GUDNYY, DMITRIY
Address: 2841 YAMADA LANE
City-St-Zip: NORTH PORT, FL 34286 US

Title: D,S (X) Change () Addition
Name: GUDNAYA, NINA
Address: 2841 YAMADA LANE
City-St-Zip: NORTH PORT, FL 34286 US

Title: () Change () Addition
Name:
Address:
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: LEONID GUDNYY

D,P

02/09/2008

Electronic Signature of Signing Officer or Director

Date