


**2008 FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 08, 2008 08:00 AM
Secretary of State

DOCUMENT # P05000099955 1. Entity Name FLOORING LIQUIDATORS INC.	
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Principal Place of Business 5600 SEMINOLE BLVD. SEMINOLE, FL 33772 US	Mailing Address 5600 SEMINOLE BLVD. SEMINOLE, FL 33772 US
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DO NOT WRITE IN THIS SPACE



02052008 No Chg-P CR2E034 (11/05)

4. FEI Number 20-3157493	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

HODGES, WESLEY R
11998 LAKE ALLEN DRIVE
LARGO, FL 33773

**DO NOT WRITE
IN THIS SPACE**

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 Wesley R Hodges WES HODGES Registered Agent 2-05-08
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when recertifying) DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	000000821041 02/19/08-80008-003 150.00
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIR HODGES, WESLEY R 11998 LAKE ALLEN DRIVE LARGO, FL 33773
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES HODGES, ELAINE 11998 LAKE ALLEN DRIVE LARGO, FL 33773
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC HODGES, ELAINE 11998 LAKE ALLEN DRIVE LARGO, FL 33773
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

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: Wesley R Hodges WES HODGES Director 2-05-08 7273948750
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #