

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000102360

Entity Name: SURFACES FLOORING, INC.

FILED  
Apr 15, 2008  
Secretary of State

## Current Principal Place of Business:

8241 W GULF TO LAKE HWY  
CRYSTAL RIVER, FL 34429

## New Principal Place of Business:

6934 W GROVER CLEVELAND BLVD  
HOMOSASSA, FL 34446

## Current Mailing Address:

PO BOX 387  
CRYSTAL RIVER, FL 34423 US

## New Mailing Address:

FEI Number: 20-3206930      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

WORKMAN, TODD M  
3599 N YACHT TER  
BEVERLY HILLS, FL 34465 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: WORKMAN, TODD M  
Address: 3599 N YACHT TERR  
City-St-Zip: BEVERLY HILLS, FL 34465

Title: ST ( ) Delete  
Name: WORKMAN, JENNI S  
Address: 3599 N YACHT TERR  
City-St-Zip: BEVERLY HILLS, FL 34465

Title: VP ( ) Delete  
Name: BELL, JOSEPH A  
Address: 2656 W SUNRISE ST  
City-St-Zip: LECANTO, FL 34461

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JENNI S WORKMAN

ST

04/15/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date