## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000108767

**Entity Name: FREEDOM FLOORING CORPORATION** 

**FILED** Mar 21, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1065 LEWIS AVENUE 6673 DEERING CIRCLE SARASOTA, FL 34238 SARASOTA, FL 34240 **Current Mailing Address: New Mailing Address:** 1065 LEWIS AVENUE 6673 DEERING CIRCLE SARASOTA, FL 34238 SARASOTA, FL 34240 FEI Number: 55-0901659 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GOLDSMITH, STANLEY A 1605 MAIN STREET STE. 1001 SARASOTA, FL 34236 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:

Title:

Title:

Name:

Address:

City-St-Zip:

Electronic Signature of Registered Agent Date

City-St-Zip:

Election Campaign Financing Trust Fund Contribution ( ).

SARASOTA, FL 34238

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

SARASOTA, FL 34240

PAST ( ) Delete Title: PAST (X) Change ( ) Addition GEOGHAGAN, GREGORY A GEOGHAGAN, GREGORY A Name: Name: 1065 LEWS AVENUE 6673 DEERING CIRCLE Address: Address: City-St-Zip: SARASOTA, FL 34238 City-St-Zip: SARASOTA, FL 34240

( ) Delete **VSAT** Title: **VSAT** (X) Change ( ) Addition HOFFMASTER, BETH-ANNE L Name: HOFFMASTER, BETH-ANNE L 1065 LEWIS AVE. 6673 DEERING CIRCLE Address:

SARASOTA, FL 34238 City-St-Zip: City-St-Zip: SARASOTA, FL 34240 Title: ( ) Delete Title: (X) Change ( ) Addition GEOGHAGAN, GREGORY A GEOGHAGAN, GREGORY A Name: Name: 1065 LEWIS AVENUE 6673 DEERING CIRCLE Address: Address:

Title: ( ) Delete Title: (X) Change ( ) Addition HOFFMASTER, BETH-ANNE L HOFFMASTER, BETH-ANNE L Name: Name: Address: 1065 LEWIS AVENUE Address: 6673 DEERING CIRCLE City-St-Zip: City-St-Zip: SARASOTA, FL 34238 SARASOTA, FL 34240

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: BETH-ANNE HOFFMASTER **VSAT** 03/21/2007