## ANNUAL REPORT

## DOCUMENT # P05000135254--

. Entity Name

RYAN'S FLOORING, INCORPORATED

US

Principal Place of Business
546 SW REMINGTON CT

LAKE CITY, FL 32024

Mailing Address

546 SW REMINGTON CT LAKE CITY, FL 32024 FILED Jul 10, 2008 08:00 AM Secretary of State



05122008

No Chg-P

CR2E034 (11/05)

4. FEI Number 68-0615267

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

HARDIN, RYAN C 546 SW REMINGTON CT LAKE CITY, FL 32024

## DO NOT WRITE IN THIS SPACE

the above	named entity submits this statement for the pons of registered agent.	ourpose of changing its registered off	ice or r	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept	
SIGNATURE_	Symmetric, typed or printed name of registered agent and title I	f applicable. (NOTE: Registered Agent	: #ignature	required when reinstating)	71108 DATE	
	LE NOW!!! FEE IS \$150.00 ue by September 12, 2008	Election Campaign Financing     Trust Fund Contribution.		\$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 DIREC	CTORS			L.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
ITLE HAME Street address City-St-Zip	P HARDIN, RYAN C 546 SW REMINGTON CT LAKE CITY, FL 32024					
ITLE MAME TREET ADDRESS CITY-ST-ZIP	VS DOUGLAS, KRISTY L 546 SW REMINGTON CT LAKE CITY, FL 32024				U00000953929 07/10/08-80004-007 158.75	
itle IAME Street Address Sity-St-Zip				DO NOT WRITE		
itle Iame Treet address Ity-st-zip			IN THIS SPACE			
itle IAME Treet address						

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: Want for

ITLE IAME TREET ADDRESS ITY-ST-ZIP

108 396-965-3259