

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000136452

FILED
Apr 15, 2009
Secretary of State

Entity Name: BIG K FLOOR COVERING, INC

Current Principal Place of Business:

1846 BEACONS FIELD DR.
WESLEY CHAPEL, FL 33543

New Principal Place of Business:

1846 BEACONS FIELD DR.
WESLEY CHAPEL, FL 33543 US

Current Mailing Address:

1846 BEACONS FIELD DR.
WESLEY CHAPEL, FL 33543

New Mailing Address:

1846 BEACONS FIELD DR.
WESLEY CHAPEL, FL 33546 US

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

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
1203 GOVERNOR'S SQUARE BLVD
SUITE 101
TALLAHASSEE, FL 323012960 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: MORAN-COLLINS, MARY
Address: 1846 BEACONSFIELD DR
City-St-Zip: WESLEY CHAPEL, FL 33543

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V () Change (X) Addition
Name: MORAN-COLLINS, MARY
Address: 1846 BEACONSFIELD DR
City-St-Zip: WESLEY CHAPEL, FL 33543

Title: S () Change (X) Addition
Name: MORAN-COLLINS, MARY
Address: 1846 BEACONSFIELD DR
City-St-Zip: WESLEY CHAPEL, FL 33543

Title: T () Change (X) Addition
Name: MORAN-COLLINS, MARY
Address: 1846 BEACONSFIELD DR
City-St-Zip: WESLEY CHAPEL, FL 33543

Title: D () Change (X) Addition
Name: MORAN-COLLINS, MARY
Address: 1846 BEACONSFIELD DR
City-St-Zip: WESLEY CHAPEL, FL 33543

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: MARY MORAN-COLLINS

P

04/15/2009

Electronic Signature of Signing Officer or Director

Date