

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05449

FILED
Apr 05, 2006
Secretary of State

Entity Name: COVINGTON FLOORING COMPANY, INC.

Current Principal Place of Business:

288-A OXMOOR COURT
BIRMINGHAM, AL 35209 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 19968
BIRMINGHAM, AL 35219 US

New Mailing Address:

FEI Number: 63-0823264 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: S () Delete
Name: COVINGTON, CATHERLIN, E L.
Address: 3548 SHANDWICK PLACE
City-St-Zip: BIRMINGHAM, AL 35242

Title: PSTD () Delete
Name: COVINGTON, JOSEPH F., JR
Address: 3548 SHANDWICK PLACE
City-St-Zip: BIRMINGHAM, AL 35242

Title: V () Delete
Name: COVINGTON, EDWARD,
Address: 288 OXMOOR CT
City-St-Zip: BIRMINGHAM, AL 35209

Title: CFO () Delete
Name: JOHNSON, RICHARD K
Address: 4960 ALTAMONT ROAD
City-St-Zip: BIRMINGHAM, AL 35222

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:

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

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: ANGELA BARR

APMG

04/05/2006

Electronic Signature of Signing Officer or Director

_____ Date