2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2007
Secretary of State

DOCUMENT# P06000028772

Entity Name: JULINGTON CREEK CARPET CARE, INC.

Current Principal Place of Business:

100 STATE ROAD 13 N SUITE E
JACKSONVILLE, FL 322593856

New Principal Place of Business:

253 BELL BRANCH LANE
JACKSONVILLE, FL 32259

Current Mailing Address:

100 STATE ROAD 13 N SUITE E
JACKSONVILLE, FL 322593856

New Mailing Address:

253 BELL BRANCH LANE
JACKSONVILLE, FL 32259

FEI Number: 16-1747997 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GILL, MICHEL M
100 STATE ROAD 13 N SUITE E
JACKSONVILLE, FL 322593856 US

Name and Address of New Registered Agent:

GILL, MICHEL M
253 BELL BRANCH LANE
JACKSONVILLE, FL 32259 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: _____ 04/12/2007
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: GILL, MICHEL M
Address: 100 STATE ROAD 13 N SUITE E
City-St-Zip: JACKSONVILLE, FL 322593856

Title: VP ( ) Delete
Name: GILL, DAVID A
Address: 100 STATE ROAD 13 N SUITE E
City-St-Zip: JACKSONVILLE, FL 322593856

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: GILL, MICHEL M
Address: 253 BELL BRANCH LANE
City-St-Zip: JACKSONVILLE, FL 32259

Title: VP (X) Change ( ) Addition
Name: GILL, DAVID A
Address: 253 BELL BRANCH LANE
City-St-Zip: JACKSONVILLE, FL 32259

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: DAVID A GILL VP 04/12/2007
Electronic Signature of Signing Officer or Director — Date