

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 14, 2007 8:00 am
Secretary of State

05-14-2007 90078 024 ***150.00

DOCUMENT # P06000046889

1. Entity Name

ANDERSON'S CREATIVE WOOD FLOORING INC.



Principal Place of Business

1535 E. CROOKED LAKE DRIVE
EUSTIS FL 32726
US

Mailing Address

1535 E. CROOKED LAKE DRIVE
EUSTIS FL 32726
US



2. Principal Place of Business - No P.O. Box #

3820 Highway 19-A North

3. Mailing Address

Same

Suite, Apt. #, etc.

Mant Dora, FL

Suite, Apt. #, etc.

City & State

32757

USA

City & State

Zip

Country

Zip

Country

4. FEI Number

20-4678153

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

1st MOORE

CR2E034 (10/06)

6. Name and Address of Current Registered Agent

ANDERSON, TERESA L
1535 E. CROOKED LAKE DRIVE
EUSTIS FL 32726

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2007 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
P
ANDERSON, TERESA L
1535 E. CROOKED LAKE DRIVE
EUSTIS FL 32726 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
S
LANE, ALLISON L
1535 E. CROOKED LAKE DRIVE
EUSTIS FL 32726 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

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STREET ADDRESS
CITY - ST - ZIP
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TITLE
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CITY - ST - ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
S
Lane, Allison L.
Grandview Avenue
Vinitilla, FL 32784 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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

Teresa L. Anderson

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-8-07 (352)385-9441

Date

Daytime Phone #