

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 07, 2008 8:00 am
Secretary of State

05-07-2008 90111 047 ***158.75

DOCUMENT # P06000090254

1. Entity Name

KEATS FLOORING, INC.



Principal Place of Business

16804 BACHMANN AVE.
HUDSON FL 34667

Mailing Address

16804 BACHMANN AVE.
HUDSON FL 34667



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

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

1st MOORE

CR2E034 (10/07)

4. FEI Number

20-4543963

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

Zip

Country

Pa.sco

Zip

Country

Pa.sco

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KEATS, LINDA
16804 BACHMANN AVE.
HUDSON FL 34667

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 his or her place.

(NOTE: Registered Agent signature required when removing)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2008 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
O
KEATS, LINDA
16804 BACHMAN AVE
HUDSON FL 34667 ☐ Delete

TITLE
NAME
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CITY- ST- ZIP
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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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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:

Linda Keats

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/19/08

Date

Daytime Phone #