## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000027858

FILED May 09, 2008 Secretary of State

Entity Name: DIVERSIFIED MARBLE AND TILE OF CENTRAL FLORIDA INC

Current Principal Place of Business: New Principal Place of Business:

6735 SE 180TH AVE RD 13602 COUNTRY ROAD109H OCKLAWAHA, FL 32179 LADY LAKE, FL 32159

Current Mailing Address: New Mailing Address:

6735 SE 180TH AVE RD
OCKLAWAHA, FL 32179

13602 COUNTRY ROAD109H
LADY LAKE, FL 32195

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

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PETERSON, CHAD
6735 SE 180TH AVE RD
0CKLAWAHA, FL 32179 US
PETERSON, CHAD
13602 COUNTRY ROAD109H
LADY LAKE, FL 32195 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: CHAD PETERSON 05/09/2008

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: P (X) Change ( ) Addition

 Name:
 PETERSON, CHAD
 Name:
 PETERSON, CHAD

 Address:
 6735 SE 180TH AVE RD
 Address:
 13602 COUNTRY ROAD109H

 City-St-Zip:
 OCKLAWAHA, FL 32179
 City-St-Zip:
 LADY LAKE, FL 32195

Title: VP (X) Delete Title: ( ) Change ( ) Addition

 Name:
 GOODMAN, CHARLES
 Name:

 Address:
 2245 SE 174TH CT
 Address:

 City-St-Zip:
 SILVER SPRINGS, FL 34488
 City-St-Zip:

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: CHAD PETERSON P 05/09/2008