

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000067243

FILED  
Jun 24, 2009  
Secretary of State

Entity Name: ADVANCED CARPET CARE AND INSTALLATION INCORPORATED

## Current Principal Place of Business:

55234 WHITE OAK PLACE  
CALLAHAN, FL 32011

## New Principal Place of Business:

2767 LAKE DR  
HILLIARD, FL 32046

## Current Mailing Address:

55234 WHITE OAK PLACE  
CALLAHAN, FL 32011

## New Mailing Address:

PO BOX 545  
HILLIARD, FL 32046

FEI Number: 30-0494836

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KENNETH, HUNTER W JR.  
55234 WHITE OAK PLACE  
CALLAHAN, FL 32011 US

## Name and Address of New Registered Agent:

PHILLIPS, WANDA K  
2767 LAKE DR  
HILLIARD, FL 32046 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: WANDA K PHILLIPS

06/24/2009

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:

Title: P ( ) Delete  
Name: HUNTER, KENNETH W JR  
Address: 55234 WHITE OAK PLACE  
City-St-Zip: CALLAHAN, FL 32011

Title: VP (X) Delete  
Name: PHILLIPS, WANDA K  
Address: 2767 LAKE DRIVE  
City-St-Zip: HILLIARD, FL 32046

Title: S (X) Delete  
Name: ASPINWALL, JAMES W  
Address: 54093 SHIRLEY DRIVE  
City-St-Zip: CALLAHAN, FL 32011

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: PHILLIPS, WANDA K  
Address: PO BOX 545  
City-St-Zip: HILLIARD, FL 32046

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 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: WANDA K PHILLIPS

P

06/24/2009

Electronic Signature of Signing Officer or Director

Date