2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000072433

Title:

Name:

Address:

City-St-Zip:

(X) Delete

NELSON, MARK A

1610 FAIRLIGHT ST., NW

PALM BAY, FL 32907

Entity Name: BJ WILLIAM'S COMMERCIAL FLOOR COVERINGS INC.

FILED Mar 17, 2009 Secretary of State

Current Prir	ncipal Place	of Business:	New Princ	New Principal Place of Business:			
546 VIN ROS PALM BAY, F							
Current Mai	ling Addres	s:	New Maili	New Mailing Address:			
546 VIN ROS PALM BAY, F							
FEI Number: 80-0234984 FEI Number Applied For ()			FEI Number Not Appl	FEI Number Not Applicable () Certificate of Status Desired ()			
Name and A	ddress of C	urrent Registered Agent:	Name and	Name and Address of New Registered Agent:			
JASKULSKI, 546 VIN ROS PALM BAY, f The above na in the State o	SE CIR., SE FL 32909 amed entity s	US ubmits this statement for the po	urpose of changing i	ts registered o	office or registe	ered agent, or both,	
SIGNATURE	<u>:</u>						
	Electroni	c Signature of Registered Age	nt	Date			
Election Camp	aign Financing	Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Name: S Address: & City-St-Zip: F	JASKULSKI, WI 546 VIN ROSE (PALM BAY, FL	CIR., SE	Title: Name: Address: City-St-Zip: Title:	JASKULSKI, W 546 VIN ROSE PALM BAY, FL	CIR., SE		
Address: 5	JASKULSKI, LÍS 546 VIN ROSE (PALM BAY, FL	CIR., SE	Name: Address: City-St-Zip:	JASKULSKI, LI 546 VIN ROSE PALM BAY, FL	ISA E CIR., SE		

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: LISA E. JASKULSKI O 03/17/2009

() Change () Addition