

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000088317

**FILED**  
**Mar 13, 2011**  
**Secretary of State**

**Entity Name:** T. L. JOHNSON FLOORING CO. INC.

**Current Principal Place of Business:**

2401 SE STONECROP STREET  
PORT ST. LUCIE, FL 34984 US

**New Principal Place of Business:**

2811 GRANDE PKWY  
#105  
PALM BEACH GARDENS, FL 33410 US

**Current Mailing Address:**

2401 SE STONECROP STREET  
PORT ST. LUCIE, FL 34984 US

**New Mailing Address:**

2811 GRANDE PKWY  
#105  
PALM BEACH GARDENS, FL 33410 US

**FEI Number:** 27-1181044

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JOHNSON, TROY  
2401 SE STONECROP STREET  
PORT ST. LUCIE, FL 34984 US

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

JOHNSON, TROY  
2811 GRANDE PKWY  
#105  
PALM BEACH GARDENS, FL 33410 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:**

03/13/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** JOHNSON, TROY  
**Address:** 2811 GRANDE PKWY #105  
**City-St-Zip:** PALM BEACH GARDENS, FL 33410 US

**Title:** VP  
**Name:** JOHNSON, TROY  
**Address:** 2811 GRANDE PKWY #105  
**City-St-Zip:** PALM BEACH GARDENS, FL 33410 US

**Title:** T  
**Name:** JOHNSON, CODY  
**Address:** 2811 GRANDE PKWY  
**City-St-Zip:** PALM BEACH GARDENS, FL 33410 US

I hereby 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 all other like empowered.

**SIGNATURE:** TROY JOHNSON

P

03/13/2011

Electronic Signature of Signing Officer or Director

Date