


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 10, 1999 8:00 am
Secretary of State

05-10-1999 90025 026 ***150.00

0522807

PROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P20280					
1. Corporation Name SOUTHERN FLOORING DISTRIBUTORS, INC.					
Principal Place of Business 107 ANDERSON CT DOTHAN AL 36301-329 US			Mailing Address P.O. BOX 2107 DOTHAN AL 36302 US		
2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 08/01/1988	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		4. FEI Number 63-0672619	
22 City & State		27 City & State		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23 Zip Country		28 Zip Country		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24		25		29	
26		27		30	
9. Name and Address of Current Registered Agent GAUTNEY, WILL 6959 STUART AVENUE JACKSONVILLE FL 32236			10. Name and Address of New Registered Agent		
81 Name			82 Street Address (P.O. Box Number is Not Acceptable)		
83			84 City		
85 Zip Code			FL		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____					
12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE <input type="checkbox"/> DELETE			1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME PTD			1.2 NAME		
STREET ADDRESS CARPENTER, G.W.			1.3 STREET ADDRESS		
CITY-ST-ZIP 12 WALFORD PLACE			1.4 CITY-ST-ZIP		
CITY-ST-ZIP DOTHAN AL			2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE <input type="checkbox"/> DELETE			2.2 NAME		
NAME D			2.3 STREET ADDRESS		
STREET ADDRESS CARPENTER, KATHY			2.4 CITY-ST-ZIP		
CITY-ST-ZIP 12 WALFORD PLACE			3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition		
CITY-ST-ZIP DOTHAN AL			3.2 NAME		
TITLE <input type="checkbox"/> DELETE			3.3 STREET ADDRESS		
NAME VSD			3.4 CITY-ST-ZIP		
STREET ADDRESS CARPENTER, H.H.			4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition		
CITY-ST-ZIP 7 BELLE OAK			4.2 NAME		
CITY-ST-ZIP DOTHAN AL			4.3 STREET ADDRESS		
TITLE <input type="checkbox"/> DELETE			4.4 CITY-ST-ZIP		
NAME D			5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition		
STREET ADDRESS CARPENTER, BARBARA			5.2 NAME		
CITY-ST-ZIP 7 BELLE OAK			5.3 STREET ADDRESS		
CITY-ST-ZIP DOTHAN AL			5.4 CITY-ST-ZIP		
TITLE <input type="checkbox"/> DELETE			6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Robert W. Carpenter, CEO Date: 4/30/99
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E034 (11/98)