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

CORPORATION ANNUAL REPORT

1998

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

FILED

Apr 28 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P93000029092 (2) DOCUMENT #

DURAFLOOR OF HERNANDO, INC.

Principal Place of Business Mailing Address 7082 MARINE BLVD. 7082 MARINER BLVD. SUITE F SUITE F DO NOT WRITE IN THIS SPACE SPRING HILL FL 34609 SPRING HILL FL 34609 3. Date Incorporated or Qualified 04/20/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3178440 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be П 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. ☐ Yes 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name ANGLIN, MITCHELL D 7082 MARINER BLVD. Street Address (P.O. Box Number is Not Acceptable) SPRING HILL FL 34609 83 Zip Code 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, typed or profed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. **DP**VT DELETE Change Addition TITLE 1.1 TITLE NAME ANGLIN, MITCHELL 1.2 NAME 7076 MARINER BLVD., SUITE F STREET ADDRESS 1.3 STREET ADDRESS SPRING HILL FL 34609 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE DS Change Addition TITLE 2.1 TITLE MAY, BOBBY NAME 2.2 NAME 7076 MARINER BLVD., SUITE F 2.3 STREET ADDRESS STREET ADDRESS SPRING HILL FL 34609 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZiP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change ___ Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY-ST-ZIP 54 CITY-S1-ZIP DELETE ☐ Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS **63 STREET ADDRESS**

64 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 of 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 for on an attachment with an order.