

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Northing
Secretary of State
Division of CORPORATIONS

APPROVED
AND
FILED

COMM 11 11 8:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000063993 (8)

1. Corporation Name

SET-RITE CERAMIC TILE, INC.

Principal Place of Business

**2114 STAUNTON AVENUE
WINTER PARK FL 32789**

Mailing Address

**2114 STAUNTON AVENUE
WINTER PARK FL 32789**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **09/09/1983** 3a. Date of Last Report **04/20/1994**

4. FEI Number **59-3202859** Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under § 199.04, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21

State, Apt. # etc.

22

City & State

23

Zip

24

2a. Mailing Address

25

State, Apt. # etc.

27

City & State

28

Zip

29

Locality

30

9. Name and Address of Current Registered Agent

**SCHWAEGERL, SHERRI F
2114 STAUNTON AVENUE
WINTER PARK FL 32789**

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0902 and 607.1504, 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 sections 607.0902, Florida Statutes.

SIGNATURE

(Signature of Registered Agent required when registered)

(Signature of Registered Agent required when registered)

(Date)

12. OFFICERS AND DIRECTORS

12.1

NAME

12.2

STREET ADDRESS

12.3

CITY, ST, ZIP

12.4

NAME

12.5

STREET ADDRESS

12.6

CITY, ST, ZIP

12.7

NAME

12.8

STREET ADDRESS

12.9

CITY, ST, ZIP

12.10

NAME

12.11

STREET ADDRESS

12.12

CITY, ST, ZIP

13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS (12)

13.1

NAME

13.2

STREET ADDRESS

13.3

CITY, ST, ZIP

13.4

NAME

13.5

STREET ADDRESS

13.6

CITY, ST, ZIP

13.7

NAME

13.8

STREET ADDRESS

13.9

CITY, ST, ZIP

13.10

NAME

13.11

STREET ADDRESS

13.12

CITY, ST, ZIP

**✓ Davis, Richard G.
8004 Rhea Circle
Orlando, FL 32807**

☐ Change ☒ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.04(b), Florida Statutes. I further certify that the information included 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 for of the corporation or the receiver or liquidator empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears on Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Sherri F. Schwaegerl*
SIGNATURE AND TYPED OR PRINTED NAME OF BILLING OFFICER OR DIRECTOR

4-7-95 **407-644-1003**
DATE TELEPHONE #