

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000080248

FILED  
Jan 26, 2009  
Secretary of State

Entity Name: A FAMILY TRADITION TILE & MARBLE, INC.

## Current Principal Place of Business:

7406 HIDDEN VALLEY DRIVE  
SUITE A  
POENSACOLA, FL 32526 US

## New Principal Place of Business:

7406 HIDDEN VALLEY DRIVE  
SUITE A  
PENSACOLA, FL 32526 US

## Current Mailing Address:

7406 HIDDEN VALLEY DRIVE  
SUITE A  
PENSACOLA, FL 32526 US

## New Mailing Address:

FEI Number: 59-3218336      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WALDROP, ROCKY R.  
6841 PINE FOREST RD.  
PENSACOLA, FL 32526 US

## Name and Address of New Registered Agent:

WALDROP, ROCKY R.  
7406 HIDDEN VALLEY DR  
PENSACOLA, FL 32526 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: ROCKY R WALDROP

01/26/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: WALDROP, ROCKY R.  
Address: 7406 HIDDEN VALLEY DRIVE  
City-St-Zip: PENSACOLA, FL

Title: STD ( ) Delete  
Name: WALDROP, CYNTHIA A.  
Address: 7406 HIDDEN VALLEY DRIVE  
City-St-Zip: PENSACOLA, FL

Title: VP ( ) Delete  
Name: WALDROP, ADAM S  
Address: 7406 HIDDEN VALLEY DR  
City-St-Zip: PENSACOLA, FL

Title: VP ( ) Delete  
Name: WALDROP, S ADAM  
Address: 7405 HIDDEN VALLEY RD  
City-St-Zip: PENSACOLA, FL 32526

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: WALDROP, ROCKY R.  
Address: 7406 HIDDEN VALLEY DRIVE  
City-St-Zip: PENSACOLA, FL 32526

Title: STD (X) Change ( ) Addition  
Name: WALDROP, CYNTHIA A.  
Address: 7406 HIDDEN VALLEY DRIVE  
City-St-Zip: PENSACOLA, FL 32526

Title: VP (X) Change ( ) Addition  
Name: WALDROP, ADAM S  
Address: 7405 HIDDEN VALLEY DR  
City-St-Zip: PENSACOLA, FL 32526

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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.

SIGNATURE: ROCKY R WALDROP

PD

01/26/2009

Electronic Signature of Signing Officer or Director

Date