

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 20, 2004 8:00 am**  
**Secretary of State**

02-20-2004 90007 006 \*\*\*150.00

**DOCUMENT # P94000010450**

1. Entity Name  
**COMPLETE FLOOR COVERING, INC.**



Principal Place of Business  
**8022 OFFICE COURT  
STE C SOUTH  
ORLANDO, FL 32809 US**

Mailing Address  
**P.O. BOX 948214  
MAITLAND, FL 32794 US**

**24013273**



2. Principal Place of Business  
**10900 PALMBAY DRIVE**

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02112004 Chg-P CR2E034 (10/03)

City & State  
**ORLANDO, FL**

City & State

4. FEI Number  
**59-3221603**

Applied For  
Not Applicable

Zip  
**32824**

Country  
**USA**

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CORCORAN, TERRANCE A  
8022 OFFICE CT  
STE C SOUTH  
ORLANDO, FL 32809**

Name

Street Address (P.O. Box Number is Not Acceptable)  
**1100 Mojave Trail**

City  
**Maitland,**

FL

Zip Code  
**32751**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*Terrence A. Corcoran*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

**2-17-04**

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PD  
CORCORAN, TERRANCE A  
8022 OFFICE CT STE C SOUTH  
ORLANDO, FL 32809 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition  
**10900 PALMBAY DRIVE  
ORLANDO, FL 32824**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VD  
CORCORAN, PAMELA L  
8022 OFFICE CT STE C SOUTH  
ORLANDO, FL 32809 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition  
**10900 PALMBAY DRIVE  
ORLANDO, FL 32824**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Terrence A. Corcoran*

*PAMELA L. CORCORAN*

Date

Daytime Phone #