

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000026953

Entity Name: TROTT'S CARPET, INC.

FILED
Apr 09, 2008
Secretary of State

Current Principal Place of Business:

1725 S NOVA RD
BLDG. D-4
SOUTH DAYTONA, FL 32119

New Principal Place of Business:

Current Mailing Address:

1725 S NOVA RD
BLDG. D-4
SOUTH DAYTONA, FL 32119

New Mailing Address:

FEI Number: 59-3247367 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TROTT, THOMAS O
1725 S NOVA RD
BLDG. D-4
SOUTH DAYTONA, FL 32119 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: TROTT, THOMAS O
Address: 1725 S NOVA RD
City-St-Zip: SOUTH DAYTONA, FL 32119

Title: VP () Delete
Name: TROTT, BETTY J
Address: 1725 S NOVA RD
City-St-Zip: SOUTH DAYTONA, FL 32119

Title: SEC () Delete
Name: SALTS, PATRICIA
Address: 1725 S NOVA RD
City-St-Zip: SOUTH DAYTONA, FL 32119

Title: TRES () Delete
Name: TROTT, THOMAS O JR
Address: 1725 S NOVA RD
City-St-Zip: SOUTH DAYTONA, FL 32119

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: TROTT, THOMAS O
Address: 1725 S NOVA RD #D4
City-St-Zip: SOUTH DAYTONA, FL 32119

Title: VP (X) Change () Addition
Name: TROTT, BETTY J
Address: 1725 S NOVA RD #D4
City-St-Zip: SOUTH DAYTONA, FL 32119

Title: SEC (X) Change () Addition
Name: SALTS, PATRICIA
Address: 1725 S NOVA RD #D4
City-St-Zip: SOUTH DAYTONA, FL 32119

Title: TRES (X) Change () Addition
Name: TROTT, THOMAS O JR
Address: 1725 S NOVA RD #D4
City-St-Zip: SOUTH DAYTONA, FL 32119

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: PATRICIA SALTS

SEC

04/09/2008

Electronic Signature of Signing Officer or Director

_____ Date