## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550:00

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000016183 (1)

## **FILED** May 04 1998 8:00am Secretary of State

RIVER CITY CARPETS, INC.						
				A MARILARI DIA MANA ADIKI BANDA ADIKI BANDA RAKAR KA	NA AMERICANA MANAK MININTEN	
Principal Plac	e of Business	Mailing Address		- I LOODILOON ESO JOSTE OTTIL ADDIN ODEN BOTT ABIN ABIN ABIN ABIN	ind briegs stadt idiad bist indi	
3001 ST AUGUSTINE RD 3001 ST AUGUSTINE RD						
JACKSONVILLE FL 32207 JACKSONVILLE FL 32207				DO NOT WRITE IN THIS	CDACE	
1				3. Date Incorporated or Qualified	3FACE	
				02/19/1996		
2. Principal P	Place of Business	2a, Mailing Address		4. FEI Number	Applied For	
21		26		59-3365892	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
City & State		27	<del></del>		Fee Required	
		Criy & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	<b>28</b>	Country	8. This corporation owes or has paid the cu		
24	25		30		Yes No	
	g. Name and Address of Curren			10. Name and Address of New Registered	Agent	
	WILTON, WAYNE K		81 Name			
13689 LONG'S LANDING ROAD W.			82 Street Addre	82 Street Address (P.O. Box Number is Not Acceptable)		
. JACKSONVILLE FL 32258						
ļ.			83		j	
			84 City		85 Zip Code	
Described to the control of the cont			the should permed accord	FL		
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.						
	im familiar with, and accept the obliga		ida Statutes.	anician c	1/2/05	
SIGNATURE	Signature Type Lor printed name of registered agri		Registered Agent signature require		/ // /	
12.	OFFICERS AND	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12	
TITLE	PD	☐ DELETE	1.1 TITLE		Change Addition	
NAME	HAMILTON, WAYNE K	No.	1.2 NAME		-	
STREET ADDRESS	13689 LONG'S LANDING RD	W.	1.3 STREET ADDRESS			
CITY-ST-ZIP TITLE	JACKSONVILLE FL 32225	DELETE	1.4 CITY - ST- ZIP 2.1 TITLE		Change Addition	
NAME	-BUHREN, WILLIAM A		22 NAME TS	MURENT ITSILLIAM A		
STREET ADDRESS	6050 SANDY ROAD DRIVE		23 STREET ADDRESS Z	OHREN, WILLIAM A 359 SANDY RUN DRINE	2	
CITY-ST-ZIP	MIDDLEBURG FL 32068		2. 4 CITY-ST-ZIP	23, 200, 7		
TITLE		☐ DELETE	3.1 TITLE		Change Addition	
NAME			3.2 NAME			
STREET ADDRESS			3.5 STREET ADDRESS		j	
CITY-ST-ZIP			3.4. CITY - ST - ZIP			
TITLE	-				☐ Change ☐ Addition	
NAME		DELETE	4.1 THTLE		C circuigo C Mosteren	
STREET ADDRESS		☐ DELETE	4. 2 NAME			
1		☐ DELETE	4.2 NAME 4.3 STREET ADDRESS		. Johango	
CITY-ST-ZIP			4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP			
TITLE		☐ DELETE	4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE		Change Addition	
TITLE NAME			4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME			
TITLE NAME STREET ADDRESS			4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		Change Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE			4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 6.4 CITY-ST-ZIP 6.1 TITLE		Change Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		Change Addition	

14. Thereby 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 or 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, or on an attachment with an address