


2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 28, 2008 8:00 am
Secretary of State

02-28-2008 90020 016 ***158.75

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1. Entity Name
STEVE LOCKE CLASSIC TILE & MARBLE, INC.



Principal Place of Business Mailing Address

3220 16TH AVE. S.E. **3220 16TH AVE. S.E.**
NAPLES FL 34117 **NAPLES FL 34117**
US **US**



2. Principal Place of Business - No P.O. Box # 3. Mailing Address

7786 Berkshire Pines DR. **7786 Berkshire Pines DR.**

Suite, Apt. #, etc. Suite, Apt. #, etc.

1st MOORE CR2E034 (10/07)

City & State City & State

NAPLES FL. **Naples, FL.**

4. FEI Number Applied For

59-3441965 Not Applicable

Zip Country Zip Country

34104 **Collier** **34104** **Collier**

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

6. Name and Address of Current Registered Agent

LOCKE, STEVEN T
3220 16TH AVE S.E.
NAPLES FL 34117

7. Name and Address of New Registered Agent

Name **"Same" LOCKE STEVEN T. "NEW ADDRESS"**

Street Address (P.O. Box Number is Not Acceptable)
7786 BERKSHIRE PINES, DR.

City **NAPLES** FL Zip Code **34104**

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: *Steven T. Locke* Date: **Feb. 20th, 2008**

Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when renouncing.) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing \$5.00 May Be Added to Fees

Trust Fund Contribution.

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
P	LOCKE, STEVEN T	3220 16TH AVE S.E.	NAPLES FL 34117	<input type="checkbox"/>
V	PATTERSON, BRIAN K	3054 42ND TERRACE S.W.	NAPLES FL 34116	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
P	LOCKE STEVEN T.	7786 BERKSHIRE PINES DR.	NAPLES, FL. 34104	<input checked="" type="checkbox"/>	<input type="checkbox"/>
V	PATTERSON BRIAN K.	7786 BERKSHIRE PINES DR.	NAPLES, FL. 34104	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: *Steven T. Locke* **STEVEN T. LOCKE** President, 2-20-08 (239)398-4949

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Days/No Phone #