

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000038035

Entity Name: SIKES TILE SERVICE, INC.

FILED
Jan 20, 2009
Secretary of State

Current Principal Place of Business:

10465 S PLEASANT GROVE RD
INVERNESS, FL 34452

New Principal Place of Business:

4488 E VIEWTOP LANE
INVERNESS, FL 34452

Current Mailing Address:

PO BOX 10245
BROOKSVILLE, FL 346030245

New Mailing Address:

FEI Number: 59-3440804 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DON SIKES
4488 E VIASTOP LANE
INVERNESS, FL 34452 US

Name and Address of New Registered Agent:

DON SIKES
4488 E VIEWTOP LANE
INVERNESS, FL 34452 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: _____

01/20/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PS () Delete
Name: SIKES, DON
Address: 10465 S PLEASANT GROVE ROAD
City-St-Zip: INVERNESS, FL 34452

Title: VP () Delete
Name: SIKES, DEBRA J
Address: 10465 S PLEASANT GROVE RD
City-St-Zip: INVERNESS, FL 34452

Title: VP () Delete
Name: SIKES, ALAN
Address: 4488 S VIEWTOP LANE
City-St-Zip: INVERNESS, FL 34452

Title: T () Delete
Name: LANE, RYAN
Address: 2405 W SUNTER AVENUE
City-St-Zip: LAKE PAWASOPFKE, FL 33530

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change () Addition
Name: SIKES, DON
Address: 4488 E VIEWTOP LANE
City-St-Zip: INVERNESS, FL 34452

Title: VP (X) Change () Addition
Name: SIKES, DEBRA J
Address: 4488 E VIEWTOP LANE
City-St-Zip: INVERNESS, FL 34452

Title: VP (X) Change () Addition
Name: SIKES, ALAN
Address: 4488 E VIEWTOP LANE
City-St-Zip: INVERNESS, FL 34452

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: DON SIKES

PRES

01/20/2009

Electronic Signature of Signing Officer or Director

Date