

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000052570

Entity Name: CARPET INFOSOURCE, INC.

FILED
Jan 05, 2005
Secretary of State

Current Principal Place of Business:

6745 PHILIPS INDUSTRIAL
SUITE 400
JACKSONVILLE, FL 32256 US

New Principal Place of Business:

Current Mailing Address:

6745 PHILIPS INDUSTRIAL
SUITE 400
JACKSONVILLE, FL 32256 US

New Mailing Address:

FEI Number: 59-3452855

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH HULSEY & BUSEY
225 WATER ST., STE. 1800
JACKSONVILLE, FL 32202 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: PS () Delete
Name: MULLINS, MARK
Address: 6745 PHILIPS INDUSTRIAL BLVD, STE 1
City-St-Zip: JACKSONVILLE, FL 32256

Title: VPM () Delete
Name: MAAS, APRIL
Address: 6745 PHILIPS INDUSTRIAL BLVD, STE 400
City-St-Zip: JACKSONVILLE, FL 32256

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: APRIL MAAS

VPM

01/05/2005

Electronic Signature of Signing Officer or Director

Date