FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT # P97000055955 (3)

GEORGIA CARPET & PADDING, INC.

aboliant of the city of the city the	•			
Principal Place of Business	Mailing Address		4 LOGISER! THE IBITS SERVICE BRITS ESSENT BRITS ESSENT BRITS BR	IAN BISIA (AIA) BISKI BISI IBAI
PO BOX 218	PO BOX 218			
ORANGE PARK FL 32073-0218	ORANGE PARK FL 32073	3-0218	DO NOT WRITE IN THIS	CDACE
			3. Date Incorporated or Qualified	BRACE
			06/24/1997	
2. Principat Place of Business	2a. Mailing Address		4. FELNumber	Applied For
21	26		59345/762	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22	27		g. communication districts because	Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23	28	T -61-	Trust Fund Contribution	Added to Fees
Zip Country	Z(p)	Country	8. This corporation owes or has paid the cu	
24 25 25 Name and Address of Curren	29	30	Personal Property Tax due June 30. 10. Name and Address of New Registered	Yes No
	ii negisteleu Agent	81 Name	10. Hame site Address of New Registered	Agent
MARTIN, CHARLES L		TVEITIG		
2404 DUNDEE CT. WEST		82 Street Addr	ess (P.O. Box Number is Not Acceptable)	
ORANGE PARK FL 32065		63		
		84 City	FL	85 Zip Code
11. Pursuant to the provisions of Sections 607.050	2 and 607.1508, Florida Stalut	es, the above-named corp	oration submits this statement for the purpose of	of changing its registered
office or registered agent, or both, in the State agent. I am familiar with, and accept the obliq	rol Florida: Such cha nge was a ations of, Section 607,0505, Fl o	authorized by the corporat orida Statutes	ion's board of directors. I hereby accept the ap-	pointment as registered
SIGNATURE				
Signature, typical or product name of right irrep and	rational distribution of the distribution of t	E: Rogistered Agent signature requir	red when reinstating) DATE	
12. OFFICERS AN	· · · · · · · · · · · · · · · · · · ·	13.	ADDITIONS/CHANGES TO OFFICERS AN	
TITLE OWNER	DELETE	1.1 TRUE 6 C	WNER DBBY D. STROUD 37 FURMA ST	Change Addition
NAME Charles L. MA	etin -	12 NAME BO	BBY D. STROUD	
STREET ADDRESS 2404 DUNDEE	court west	13 STREET ADDRESS 22	37 FUEMA SI	
TITLE OWNER NAME Charles L. MAI STREET ADDRESS 2404 DUNDEE CITY-ST-ZIP ORANGE PARK FL TITLE OWNER	32065	1.4 CITY-ST-ZIP	PANGE PARK, FL. 32073	3
TITLE OWNER	DELETE	2.1 TITLE	•	Change 🗹 Addition
NAME BORBY D. STROUS STREET ADDRESS 2237 FURMA ST	<i>P</i>	2.2 NAME		
STREET ADDRESS 2237 FURMA ST		2.3 STREET ADDRESS	•	
CITY-ST-ZIP ORANGE PARK, F	1.32023	2.4 CITY - S? - ZIP	<u></u>	
TITLE	☐ DELETE	3.1 TITLE		Change Addition
NAME		3.2 NAME		ļ
STREET ADDRESS		3.3 STREET ADDRESS		
CITY+ST-ZIP		3.4. CITY-ST-ZIP		
TITLE	L) DELETE	4.1 TITLE		Change Addition
NAME		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY - ST - ZIP		
TITLE	☐ D€LÉTE	5.1 TITLE		Change Addition
NAME		5.2 NAMŰ		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE	DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME	•	
STREET ADDRESS		6.3 STREET ADDRESS		

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 changes or or an attachment with an address.

CHARLES L. MARTIN.

904 272-74-5

FILED

May 22 1998 8:00am

Secretary of State