

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000077338

FILED  
May 09, 2006  
Secretary of State

Entity Name: WOLFE FLOORING INCORPORATED

## Current Principal Place of Business:

9423 ALANBROOKE ST  
TEMPLE TERRACE, FL 336374960

## New Principal Place of Business:

8602 TEMPLE TERRACE HWY, D-26  
TAMPA, FL 33637

## Current Mailing Address:

9423 ALANBROOKE ST  
TEMPLE TERRACE, FL 336374960

## New Mailing Address:

FEI Number: 59-3466961      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WOLFE, JAMES LARRY  
9423 ALANBROOKE ST  
TEMPLE TERRACE, FL 336374960 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PVST ( ) Delete  
Name: WOLFE, JAMES LARRY  
Address: 9423 ALANBROOKE ST  
City-St-Zip: TEMPLE TERRACE, FL 336374960

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change ( ) Addition  
Name: WOLFE, JAMES LARRY  
Address: 9423 ALANBROOKE ST  
City-St-Zip: TEMPLE TERRACE, FL 336374960

Title: V ( ) Change (X) Addition  
Name: WOLFE, DAVID T  
Address: 9423 ALANBROOKE ST  
City-St-Zip: TEMPLE TERRACE, FL 336374960

Title: V ( ) Change (X) Addition  
Name: WOLFE, ALLEN B  
Address: 9423 ALANBROOKE ST  
City-St-Zip: TEMPLE TERRACE, FL 336374960

I hereby certify that the information supplied with this filing does not qualify for the 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: ALLEN B WOLFE

VP

05/09/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date