

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000060189

Entity Name: DIDDLE'S TILE, INC.

**FILED**  
**Apr 16, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

313 STORY PARTIN RD  
ORLANDO, FL 32833

**New Principal Place of Business:**

321 STORY PARTIN RD  
ORLANDO, FL 32833

**Current Mailing Address:**

313 STORY PARTIN RD  
ORLANDO, FL 32833

**New Mailing Address:**

321 STORY PARTIN RD  
ORLANDO, FL 32833

FEI Number: 59-3595468

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DIDDLE, TIMOTHY  
313 STORY PARTIN RD.  
ORLANDO, FL 32833 US

**Name and Address of New Registered Agent:**

DIDDLE, TIMOTHY  
321 STORY PARTIN RD.  
ORLANDO, FL 32833 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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

04/16/2012

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: DIDDLE, TIMOTHY  
Address: 321 STORY PARTIN ROAD  
City-St-Zip: ORLANDO, FL 328333104

Title: VPD  
Name: DIDDLE, RENA  
Address: 321 STORY PARTIN ROAD  
City-St-Zip: ORLANDO, FL 328333104

I hereby 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 all other like empowered.

SIGNATURE: TIMOTHY DIDDLE

PD

04/16/2012

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

\_\_\_\_\_  
Date