

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000070446

**FILED**  
**Mar 28, 2012**  
**Secretary of State**

**Entity Name:** C & R TILE AND MARBLE, INC.

**Current Principal Place of Business:**

5196 TOMOKA COURT  
ST. AUGUSTINE, FL 32086

**New Principal Place of Business:**

**Current Mailing Address:**

5196 TOMOKA COURT  
ST. AUGUSTINE, FL 32086

**New Mailing Address:**

**FEI Number:** 59-3592053

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

HALL, CHARLES E  
77 ALMERIA STREET  
ST. AUGUSTINE, FL 32084 US

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

HALL, CHARLES E  
3791 A1A SOUTH  
SUITE B  
ST. AUGUSTINE, FL 32080 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

03/28/2012

Date

**OFFICERS AND DIRECTORS:**

**Title:** PTD  
**Name:** GLOVER, CHRISTINA N  
**Address:** 5196 TOMOKA COURT  
**City-St-Zip:** ST. AUGUSTINE, FL 32086

**Title:** V  
**Name:** GLOVER, RAYMOND  
**Address:** 5196 TOMOKA COURT  
**City-St-Zip:** SAINT AUGUSTINE, FL 32086

**Title:** S  
**Name:** GLOVER JR., RAYMOND  
**Address:** 5196 TOMOKA CT.  
**City-St-Zip:** ST. AUGUSTINE, FL 32086

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:** CHRISTINA GLOVER

Electronic Signature of Signing Officer or Director

PTD

03/28/2012

Date