

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB - 1 AM 11:27

DOCUMENT # S61498

(9)

1. Corporation Name

DESIGN FLOORCOVERING, INC.

Principal Place of Business

11935 TAMiami TRAIL NORTH
NAPLES FL 33963-1653

Mailing Address

11935 TAMiami TRAIL NORTH
NAPLES FL 33963-1653

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

06/21/1991

3a. Date of Last Report

05/01/1994

4. FEI Number

65-0269856

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

2a. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

9. Name and Address of Current Registered Agent

AUSTIN, ARLENE F.
3003 TAMiami TRAIL N. SUITE 270
NAPLES FL 33940

10. Name and Address of New Registered Agent

81 Name

Roetzela Address, LPA

82 Street Address (P.O. Box Number is Not Acceptable)

2003 TAMiami TRAIL NO.

83

SUITE 270 Collier Pl. 1

84 City

NAPLES, FL.

FL

85 Zip Code

33940

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with the corporation's records.

SIGNATURE

Roetzela Address, LPA by J. J. Henderson, Secretary 1-26-95

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

PD
BOOMGARDEN, GUY L.
119235 TAMiami TRAIL NO.
NAPLES FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

T
BOOMGARDEN, GUY L.
119235 TAMiami TRAIL NO.
NAPLES FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

SD B
BOOMGARDEN, KELLY
11935 TAMiami TRIAL
NAPLES FL 33963

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

2.1 TITLE

☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

3.1 TITLE

☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

4.1 TITLE

☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

5.1 TITLE

☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

6.1 TITLE

☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 changed), or on an attachment with an address.

SIGNATURE:

Kelly Boomgarden

1-19-95 8135661040

Date

Signature