2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # 23₹228*

BANDY LIGHTWEIGHT ROOFING & SUPPLY,



FILED Jan 12, 2007 08:00 AM **Secretary of State**

INCORPORATED	•	
Principal Place of Business	Mailing Address	
116 N. SEWALLS PT. RD. STUART, FL 34996	116 N. SEWALLS PT. RD. Stuart, Fl. 34996 US	

No Chg-P 01092007 CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-0882449 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BESSEMER, E. MAXINE DO NOT WRITE 116 N. SEWALLS PT. RD. STUART, FL 34996 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or priviled name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 П Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE n RESSEMER, WILLIAM J NAME STREET ADDRESS 116 N. SEWALLS PT. RD. STUART, FL 34996 CITY-ST-ZIP U00000584478 TITLE 01/12/07-80038-021 150.00 BESSEMER, WILLIAM J MAME STREET ADDRESS 116 N. SEWALLS PT. RD. CATY-ST-ZIP STUART, FL 34996 MLE DI KIRKBRIDE, TAMARA A MAME STREET ADDRESS 2614 NEPALM AVE DO NOT WRITE CITY-ST-ZIP JENSEN BEACH, FL 34957 DV IN THIS SPACE TITLE BESSEMER, W KIM B NAME STREET ADDRESS 1103 TILTON RD CITY-ST-ZIP PORT ST LUICE, FL 00000, 34952 TITLE BESSEMER, MAXINE NAME STREET ADDRESS 116 N. SEWALLS P.J. RD. CITY-ST-ZIP STUART, FL 34952 BILE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _	1 X	Jahren Bensener	1/9/07	
	SIGNATURE AND TYPED OR PRINTED NA	ANE OF SIGNING OFFICER OR DIRECTOR	Sate	Daysme Phone #