## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 405017** 

Entity Name: OLEN WALDREP & SONS ROOFING, INC.

FILED Jun 22, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

7000 SW 21ST PLACE 5801 MAYO STREET HOLLYWOOD, FL 33023

Current Mailing Address: New Mailing Address:

7000 SW 21ST PLACE 5801 MAYO STREET DAVIE, FL 33317 HOLLYWOOD, FL 33023

FEI Number: 59-1420168 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

WALDREP, GARY OLEN
7000 SW 21ST PL
DAVIE, FL 33317 US
WALDREP, GARY OLEN
5801 MAYO STREET
HOLLYWOOD, FL 33023 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: GARY WALDREP 06/22/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

 Title:
 PD
 ( ) Delete

 Name:
 WALDREP, GARY OLEN,

 Address:
 5640 SW 111TH TERRACE

 City-St-Zip:
 FT. LAUDERDALE, FL

Title: VP () Delete
Name: WALDREP, DONNA RAE

Address: 5640 SW 111 TERR
City-St-Zip: FT LAUDERDALE, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition Name: WALDREP, GARY OLEN,

Address: 5640 SW 111TH TERRACE City-St-Zip: FT. LAUDERDALE, FL 33328

Title: VP (X) Change ( ) Addition

 Name:
 WALDREP, DONNA RAE

 Address:
 5640 SW 111 TERR

 City-St-Zip:
 FT LAUDERDALE, FL 33328

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: GARY WALDREP PD 06/22/2005