

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

APPROVED
AND
FILED

95 APR 18 PM 5: 56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 473418 (2)

1. Corporation Name

SUNCOAST ROOFERS SUPPLY, INC.

Principal Place of Business

2430 TERMINAL DRIVE SOUTH
P.O. BOX 12587
ST. PETERSBURG FL 33733

Mailing Address

2430 TERMINAL DRIVE SOUTH
P.O. BOX 12587
ST. PETERSBURG FL 33733

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

04/02/1975

3a. Date of Last Report

04/18/1994

4. FEI Number

59-1583243

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 193.032,
Florida Statutes

☒ Yes ☐ No

2. Principal Place of Business

21 2430 Terminal Dr. S.

2a. Mailing Address

26 P.O. Box 12587

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 St. Petersburg, FL

City & State

28 St. Petersburg, FL

Zip

24 33712

County

25 pinellas

Zip

29 33733

County

30 Pinellas

9. Name and Address of Current Registered Agent

GREGORY, ROWLAND E., SR.
2430 TERMINAL DR S.
ST. PETERSBURG FL 33712

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent, and fee if applicable

DATE Registered Agent signature required when resigning

DATE

12. OFFICERS AND DIRECTORS

TITLE PVS
NAME GREGORY, ROWLAND E. JR.
STREET ADDRESS 7498 WATERSILK DR.
CITY ST ZIP PINELLAS PARK FL

TITLE D
NAME GREGORY, ROWLAND E
STREET ADDRESS ONE BEACH DRIVE SE #2606
CITY ST ZIP ST. PETE FL

TITLE
NAME
STREET ADDRESS
CITY ST ZIP
T/S
Tamayo, William
14606 Dartmoor Lane
Tampa, FL 33624

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

TITLE
NAME
STREET ADDRESS
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 110.07(3)(b), 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:

R.E. Gregory, Jr.

R.E. Gregory, Jr. 4/13/95 813 327-9595

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone Number