

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**DOCUMENT # F95000000365**

**1. Corporation Name**

Anthony Roofing, Ltd., Inc.

**2. Principal Office Address**

2555 White Oak Circle

Suite, Apt. #, etc.

City & State

Aurora, IL

Zip

60504

Country

USA

**3. Mailing Office Address**

1755 S. Naperville Rd.

Suite, Apt. #, etc.

Suite #200

City & State

Wheaton, IL

Zip

60187

Country

USA

**REINSTATEMENT**

09-100

**4. Date Incorporated or Qualified  
To Do Business in Florida**

1/23/95

**5. FEI Number**

363103148

Applied For

Not Applicable

**6. CERTIFICATE OF STATUS DESIRED** ☐

\$8.75 Additional Fee required  
for a Certificate of Status

**7. Name and Address of Current Registered Agent**

Name

C T Corporation System

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

1200 S. Pine Island Road

Suite, Apt. #, Etc.

400003487714-8

-12/05/00--01070--007

\*\*\*\$900.00 \*\*\*\$900.00

City

Plantation

State

FL

Zip Code

33324

**8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.**

Signature of  
Registered Agent

*Vicky Goldstein*

**VICKY GOLDSTEIN  
SPECIAL ASSISTANT SECRETARY**

REGISTERED AGENT MUST SIGN

Date 11/23/00

**9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)**

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
	see attached list		

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**10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.**

SIGNATURE:

*Dale E. Elzy*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11-20-00

Date

954-942-3550

Daytime Phone #

**Anthony Roofing, Ltd.** , Inc.***Officers and Directors***

<b>TITLE</b>	<b>NAME</b>	<b>ADDRESS</b>
President	Joel Thompson	2555 White Oak Circle Aurora, IL 60504
VP/Secretary/Director	Gregg Wallick	3323 W. Commercial, Ste. 200 Ft. Lauderdale, FL 33309
VP/Treasurer/Director	Dale Eby	3323 W. Commercial, Ste. 200 Ft. Lauderdale, FL 33309
VP of Finance/Asst. Secy	Ken Kaduk	2555 White Oak Circle Aurora, IL 60504
VP/Operations	Thomas Gutzwiller	2555 White Oak Circle Aurora, IL 60504