2007 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

FILED Jan 31, 2007 08:00 AM DOCUMENT # M76490 **Secretary of State** 1. Entity Name J & B ROOFING, INC. Principal Place of Buşiness Mailing Address % CONNIE E. SCHUTTE 11680 90TH STREET N. % CONNIE E. SCHUTTE 11680 90TH STREET N. LARGO FL 34643 **LARGO FL 34643** 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & State City & State 4. FEI Number Applied For 59-2873295 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Cortificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SCHUTTE, CONNIE E. Street Address (P O. Box Number is Not Acceptable) 11680 90TH STREET N. **LARGO FL 34643** City Zip Code 8. The above named ontity 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 Signature, typed or printed name of registered agent and lifle if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be · After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. mu. HILE ☐ Change Addition Delete SCHUTTE, JON B. NAME NAME 11680 90TH ST. N. STREET ADDRESS STREET ADDRESS U00000612039 /02/07-80090-004 150.00 LARGO FL CHY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Addition SCHUTTE, CONNIE E. NAME 11680 90TH ST. N. STREET ADDRESS STREET ADDRESS LARGO FL CITY-ST-ZIP CITY-ST-ZIP ШŒ Delete Th Change Addition ШГ SCHUTTE, SAMANTHA NAME. NAME 11680 90 ST. N. STREET ADDRESS STREET ADDRESS LARGO FL 33773 CITY-\$1-7IP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change Addition SCHUTTE, JANIE NAMI NAME 11680 90 ST. N. STREET ADDRESS STREET ADDRESS LARGO FL 33773 CITY-ST-7IP CITY - ST - 7IP HHE ☐ Delete TITLE Change Addition SCHUTTE, JEFF NAME NAME 11680 90 ST. N STREET ADDRESS STREET ADDRESS **LARGO FL 33773** CITY-ST-ZIP CITY - ST - ZIP

12. I hereby certify that the information supplied with this fitting does not qualify for the exemptions contained in Section 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 logal effect as if made under eath; 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 of the corporation of the receiver or trustee empowered.

THE

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

SCHUTTE, JON C

LARGO FL 33773

11680 90 ST N

IIIII

NAME

STREET ADDRESS

CHY+SI-7IP

Delete

☐ Change

☐ Addition