

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED

Feb 11, 2008 08:00 AM
Secretary of State

DOCUMENT # M76490

1. Entity Name

J & B ROOFING, INC.



Principal Place of Business

% CONNIE E. SCHUTTE
11680 90TH STREET N.
LARGO FL 34643

Mailing Address

% CONNIE E. SCHUTTE
11680 90TH STREET N.
LARGO FL 34643



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-2873295

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

1st MOORE

CR2E034 (10/07)

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SCHUTTE, CONNIE E.
11680 90TH STREET N.
LARGO FL 34643

Name

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

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title. (Implication)

(NOTE: Registered Agent signature required when submitting)

DATE

FILE NOW!!! FEE IS \$150.00
After May-1, 2008 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P	☐ Delete
NAME	SCHUTTE, JON B.	
STREET ADDRESS	11680 90TH ST. N.	
CITY-STATE-ZIP	LARGO FL	
TITLE	S	☐ Delete
NAME	SCHUTTE, CONNIE E.	
STREET ADDRESS	11680 90TH ST. N.	
CITY-STATE-ZIP	LARGO FL	
TITLE	S	☐ Delete
NAME	SCHUTTE, SAMANTHA	
STREET ADDRESS	11680 90 ST. N.	
CITY-STATE-ZIP	LARGO FL 33773	
TITLE	S	☐ Delete
NAME	SCHUTTE, JANIE	
STREET ADDRESS	11680 90 ST. N.	
CITY-STATE-ZIP	LARGO FL 33773	
TITLE	D	☐ Delete
NAME	SCHUTTE, JEFF	
STREET ADDRESS	11680 90 ST. N	
CITY-STATE-ZIP	LARGO FL 33773	
TITLE	S	☐ Delete
NAME	SCHUTTE, JON C	
STREET ADDRESS	11680 90 ST N	
CITY-STATE-ZIP	LARGO FL 33773	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Change ☐ Addition
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STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

000000023654
02/20/08-80035-025 150.00

12. I hereby certify that the information supplied with this filing 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jon B. Schutte / Pres. 2-8-08 / 727-397-4702

Date

Daytime Phone #