APPROVED
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2005 FOR PROFIT CORPORATION ANNUAL REPORT

05 JUL 25 PM 1:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000049210

1. Entity Name
WAYNE WILLIAMS ROOFING, INC.

14018144

Principal Place of Business

Wayne Williams Roofing, Inc.
1948 East Halifax Drive
Port Orange FL 32128
386-255-3711

Mailing Address

07012005 No Chg-P CR2E034 (10/03)

4. FEI Number
01 06808604

Applied For
Not Applicable

5. Certificate of Status Desired

$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WILLIAMS, WAYNE
1948 E. HALIFAX DRIVE
DAYTONA BEACH, FL 32128

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 if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
Due by September 7, 2005

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE D
NAME WILLIAMS, WAYNE
STREET ADDRESS 1948 E. HALIFAX DRIVE
CITY-ST-ZIP PORT ORANGE, FL 32128

TITLE D
NAME WILLIAMS, JUSTIN WAYNE
STREET ADDRESS 1948 E. HALIFAX DRIVE
CITY-ST-ZIP PORT ORANGE, FL 32128

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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: Wayne Williams 6/30/05

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date

Daytime Phone #
386-255-3711