## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 27, 2005 8:00 am Secretary of State

DOCUMENT # P03000105714  1. Entity Name ALAN'S ROOFING & CONSTRUCTION, INC.						04-27-200:	5 90289 01	[7 ***15	50.00
Principal Place	e of Business	Mailing Address	Mailing Address						
1420 MACINTOSH BLVD. Nokomis, Fl 34275 US		1420 MACINTOSH BLVD. Nokomis, Fl 34275 us				SI ITRIK BEIEL PIIN	12221 (1211 <b>2</b> 12)	1981 II 1988	
2. Principal Place of Business		3. Mailing Address							
						BAINS WIN ARISI BAISI SAN	ME ISMIN MANNE WINE	AMENT JIRTA MINI	IBBI () (88)
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04222005	Chg-P	CR2E034			
City & State		City & State			4. FEI Numbe 27-0068			<u> </u>	plied For t Applicable
Zip	Country	Zip	Counti		5. Certificate	of Status Desired		<b>8.75</b> Addi ee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent					
CROW, SCOTT A				Name					
1420 MACINTOSH BLVD. NOKOMIS, FL 34275				Street Address (P.O. Box Number is Not Acceptable)					
140/KOMIO, 1 E 34213									
				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									
FILE NOW!!! FEE IS \$150.00  After May 1, 2005 Fee will be \$550.00  9. Election Campaign Fine Trust Fund Contribution					5.00 May Be ded to Fees				
10.	OFFICERS AND	DIRECTORS	11.		ADDITIONS/	CHANGES TO OFF	FICERS AND D	DIRECTORS	S IN 11
TITLE NAME STREET ADDRESS	DPT CROW, SCOTT A 1420 MACINTOSH BLVD.	☐ Delete	TITL NAM STRE	- 1			1	∐ Changé	☐ Addition
CITY-ST-ZIP	NOKOMIS, FL 34275			-S1-2IP					
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CITY-ST-ZIP			CITY	-ST-ZIP					
TITLE NAME		☐ Delete	TITU NAM				ļ	Change	Addition
STREET ADDRESS				ET ADDRESS					
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TITLE		☐ Delete	TITU	i				Change	Addition
NAME STREET ADDRESS			MAN IST2	E ET ADORESS					·
CITY-SI-ZIP				-ST-ZIP					İ
TITLE		☐ Defete	TITL	E				☐ Change	☐ Addition
NAME.			NAM	IE.					
STREET ADDRESS			STRE	ET ADORESS					

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 amounted.

SIGNATURE:

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-25-05

Daytime Phone #