


**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**May 02, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # P03000129151  
 1. Entity Name  
 KENNETH JACKSON ROOFING INC.



Principal Place of Business      Mailing Address  
 156 ALABAMA STREET      156 ALABAMA STREET  
 CRESTVIEW, FL 32536      CRESTVIEW, FL 32536

**DO NOT WRITE IN THIS SPACE**



03092005      No Chg-P      CR2E034 (10/03)

4. FEI Number      Applied For  
 01-0802350      Not Applicable

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

6. Name and Address of Current Registered Agent

JACKSON, KENNETH  
 114 TWIN OAK DR  
 CRESTVIEW, FL 32536

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)      DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS	
TITLE	P
NAME	JACKSON, KENNETH
STREET ADDRESS	114 TWIN OAK DR
CITY - ST - ZIP	CRESTVIEW, FL 32536
TITLE	V
NAME	WALTMAN, LAMAR
STREET ADDRESS	440 SMITH RD
CITY - ST - ZIP	DEFUNIAK SPRINGS, FL 32433
TITLE	T
NAME	MORRIS, MICHAEL
STREET ADDRESS	156 ALABAMA STREET
CITY - ST - ZIP	CRESTVIEW, FL 32536
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

1100000356153  
 05/04/05-80025-006 150.00

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Kenneth R Jackson      KENNETH JACKSON      4-29-2005      850-689-870  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #