

# 2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # P05000160545

1. Entity Name  
TAYLOR-MADE ROOFING, INC.



Principal Place of Business  
1054 ALBANY COURT  
NAPLES, FL 34105

Mailing Address  
1054 ALBANY COURT  
NAPLES, FL 34105

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

04042007

Chg-P

CR2E034 (12/06)

4. FEI Number  
20-3924174

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

LAPENTA, CHRISTINE C  
1054 ALBANY COURT  
NAPLES, FL 34105

7. Name and Address of New Registered Agent

Name Taylor, Christine C.  
Street Address (P.O. Box Number is Not Acceptable)  
1054 Albany Court  
City Naples FL Zip Code 34105

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

Christine Taylor

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/3/07  
DATE

Amended AR is \$61.25

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE DP  
NAME LAPENTA, CHRISTINE C  
STREET ADDRESS 1054 ALBANY COURT  
CITY-ST-ZIP NAPLES, FL 34105 ☐ Delete

TITLE VP  
NAME TAYLOR, MICHAEL R  
STREET ADDRESS 1054 ALBANY COURT  
CITY-ST-ZIP NAPLES, FL 34105 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D.C.  
NAME Norman Dopfer  
STREET ADDRESS 1054 Albany Ct.  
CITY-ST-ZIP Naples FL 34105 ☐ Change ☒ Addition

TITLE m  
NAME Jose Rodriguez  
STREET ADDRESS 1054 Albany Ct  
CITY-ST-ZIP Naples FL 34105 ☐ Change ☒ Addition

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

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

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

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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:

Christine Taylor Christine Taylor

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/3/07  
Date

239-823-8922  
Daytime Phone #

FILED

2007 APR 10 AM 10:32

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

