

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000038357

Entity Name: STUDARD ROOFING, INC.

FILED
Jan 24, 2012
Secretary of State

Current Principal Place of Business:

423 LAKE MARIETTA DR W.
JACKSONVILLE, FL 32220

New Principal Place of Business:

423 LAKE MARIETTA DR W.
JACKSONVILLE, FL 32220 UN

Current Mailing Address:

423 LAKE MARIETTA DR W.
JACKSONVILLE, FL 32220

New Mailing Address:

423 LAKE MARIETTA DR W.
JACKSONVILLE, FL 32220 UN

FEI Number: 59-3315232

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STUDARD, JOAN E.
423 LAKE MARIETTA DR W
JACKSONVILLE, FL 32220 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: P
Name: STUDARD, ALTON MICHAEL
Address: 423 LAKE MARIETTA DR W
City-St-Zip: JACKSONVILLE, FL 32220

Title: V/T
Name: STUDARD, JOAN E.
Address: 423 LAKE MARIETTA DR W
City-St-Zip: JACKSONVILLE, FL 32220

Title: S
Name: CANNADAY, MICHAEL D.
Address: 1138 SAWYERWOOD DR
City-St-Zip: JACKSONVILLE, FL 32221

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: JOAN E. STUDARD

VP

01/24/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date