

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P96000079370

FILED
Jan 09, 2003
Secretary of State

Entity Name: QUALITY ROOFING OF FLORIDA, INC.

Current Principal Place of Business:

66601 N. 50TH ST.
TAMPA, FL 33610 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 11418
TAMPA, FL 33680 US

New Mailing Address:

6601 N 50TH ST
TAMPA, FL 33610 US

FEI Number: 59-3404411

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARRISON, JOHN ROBERT
530 LIMONA ROAD
BRANDON, FL 33510 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VTD () Delete
Name: GARRISON, JOHN ROBERT
Address: 530 LIMONA ROAD
City-St-Zip: BRANDON, FL 33510

Title: PS () Delete
Name: JENKINS, RICHARD C
Address: 3024 W CHAPIN AVE
City-St-Zip: TAMPA, FL 33611

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: JOHN GARRISON

VTD

01/09/2003

Electronic Signature of Signing Officer or Director

_____ Date