

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Apr 28 1998 8:00am
Secretary of State

PROFIT CORPORATION
ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000101401 (2)

1. Corporation Name

GENERAL ROOFING [REDACTED] INC.
SERVICES

N/C
3.27.98

Principal Place of Business

951 SOUTH ANDREWS AVENUE
POMPANO BEACH FL 33069

Mailing Address

951 SOUTH ANDREWS AVENUE
POMPANO BEACH FL 33069

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/02/1997

4. FEI Number

65-0800123

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

10. Name and Address of New Registered Agent

81 Name

CT Corporation System

82 Street Address (P.O. Box Number is Not Acceptable)

1200 S. Pine Island Road

83

84 City

Plantation

FL

85 Zip Code

33324

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Barbara A Burke

SPECIAL ASSISTANT SECRETARY

4-2398

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP
~~CEO/President~~ ☐ 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

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE CEO/PRESIDENT ☐ Change ☒ Addition
1.2 NAME GREGG WALLICK
1.3 STREET ADDRESS 951 S. ANDREWS AVENUE
1.4 CITY-ST-ZIP POMPANO BEACH FL 33069

2.1 TITLE VP OF FINANCE/TREASURER/SECRETARY ☐ Change ☒ Addition
2.2 NAME DALE EBY
2.3 STREET ADDRESS 951 S. ANDREWS AVENUE
2.4 CITY-ST-ZIP POMPANO BEACH FL 33069

3.1 TITLE VP OF HUMAN RESOURCES ☐ Change ☒ Addition
3.2 NAME ANGELA PETTUS
3.3 STREET ADDRESS 951 S. ANDREWS AVENUE
3.4 CITY-ST-ZIP POMPANO BEACH FL 33069

4.1 TITLE VP OF TECHNOLOGY ☐ Change ☒ Addition
4.2 NAME ROBERT BROOKER
4.3 STREET ADDRESS 951 S. ANDREWS AVENUE
4.4 CITY-ST-ZIP POMPANO BEACH, FL 33069

5.1 TITLE VP OF OPERATIONS ☐ Change ☒ Addition
5.2 NAME WILLIAM ABERGER
5.3 STREET ADDRESS 951 S. ANDREWS AVENUE
5.4 CITY-ST-ZIP POMPANO BEACH FL 33069

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

John E. [REDACTED] Treasurer

Dale E Eby 4/21/98 954/012-3550

CR2E034 (10/97)