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

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P97000101401

GENERAL ROOFING ACQUISITION CORP.

Principal Place of Business Mailing Address 951 SOUTH ANDREWS AVENUE 951 SOUTH ANDREWS AVENUE POMPANO BEACH FL 33069 POMPANO BEACH FL 33069

2. Principal Place of	Business	2a. Mailing Addre	985
21		26	
Suite Apt #, etc		Suite, Apt #,	etc
22		27	
City & State		City & State	
23		28	
Zip	Country	Zip	Country
24	25	29	30
9. N	lame and Address of	Current Registered Agent	·

CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324

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4.	65-0800123		] [	Applied For Not Applicat
5.	Certificate of Status Desired	[ ]	\$8.75 Addition Fee Required \$5.00 May Be Added to Fees	
6.	Election Campaign Financing Trust Fund Contribution	[]		
8.	This corporation owes the corn Personal Property Tax	ent year I	nt⊲ngible [  Yes	[∕.No
10.	Name and Address of New R	tegistere	d Agent	

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. Thereby accept the appointment as registered agent, 1 am familiar with, and accept the obligations of, Section 607,0505. Florida Statutes

83

SIGNATURE

City

Name

Street Ad-

85 Zip Code

<u></u>	Signature, typed or printed name of registere La year and tise it apple and		-	regio dialor nei stato pi		
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AI		
TITLE	CEPD	[ ] DELETE	11100	P.D.	<b>L</b> → <del>en</del> ange	[   Add tion
NAME *	CALLICK, GREGG		1.2 NAME	Wallick, Gregg		
STREET ADDRESS	951 S. ANDREWS AVENUE		13 STRÉET ADDRESS	ر ب		
CITY-ST-ZIP	POMPANO BEACH FL 33069		14 CITY - \$T - Zie1		_	
TITLE	VFTS	[] DELETE	2 1 THUE	T, S, D	[   Change	[ ] Addition
NAME	EBY, DALE		2.2 NAME			
STREET ADDRESS	951 SOUTH ANDREWS AVENUE		23 STREET ADORESS			Ì
CITY-ST-ZIP	POMPANO BEACH FL 33069	_	2 4 C(TY+S1+Z)P	l	don.	
TITLE	VPHR	DELETE	3.1 THLF	0000 <b>0285</b> 3 -04/27/396	. LEnange	[_LAddition
NAME	PETTUS, ANGELA		3.2 NAME	****380.00	1100101 1100101	13   3 <b>0</b> 0
STREET ADDRESS	951 SOUTH ANDREWS AVENUE		3.3 STREET ADDRESS	・ ・ ・ ・	****!	J. 88
CITY-ST-ZIP	POMPANO BEACH FL 33069		34 OTY \$1.2/6			ļ
TITLE	VPT	DELFTE	4.1.1iT. E		[   Change	[  Addition
NAME	Brooker, Robert		4 2 NAME			
STREET ADDRESS	951 SOUTH ANDREWS AVENUE		40 STREET ADDRESS			
City-ST-ZIP	POMPANO BEACH FL 33069		4.4 CHY-\$1-2#*			
TOTLE	VPO	DELETE	5.1 THEF		[   Ohange	[  Addition
NAME	ABBERGER, WILLIAM		5.2 NAME		_	-
STREET ADDRESS	951 SOUTH ANDREWS AVENUE		5.3 STREET AFUNESS			
CITY-ST-ZIP	POMPANO BEACH FL 33069		54 CiTY -\$1 -71-			
TITLE	<u> </u>	[] DELETE	6.1 THT. F		[   Ohange	[   Addition
NAME			6.2 NAME		-	
STREET ADDRESS			6.) STREET AT ORESS	15 11101/2 U	100	
CiTY-ST-ZiP			640011-51-201	10 71/2/199	૧૯મા	
14. Thereby 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 squadure 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 or an attaching a with an address, with all other like empowered.						
SIGNAT	URE: SIGNATURE AND TYPED OR PRINTED NAME OF	AGNING OFFICER OR	DIRECTOR	4/20/99 954	1942-3	<i>9</i> 50