


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 11, 2008 08:00 AM
Secretary of State

DOCUMENT # 200084 1. Entity Name ATLANTIC ROOFING AND SHEET METAL COMPANY, INC.	
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Principal Place of Business 312 S BAY ST POB 2088 BUNNELL, FL 32110	Mailing Address 312 S BAY ST POB 2088 BUNNELL, FL 32110
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DO NOT WRITE IN THIS SPACE



01062008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-0794417	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**ROBERTS, OSCAR D.
7201 CR 305
BUNNELL, FL 32110**

**DO NOT WRITE
IN THIS SPACE**

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**


9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ROBERTS, OSCAR D. 7201 CR 305 BUNNELL, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD ROBERTS, ROSELLEN C. 7201 CR 305 BUNNELL, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD MILHOLEN, EUGENIA M. 1644 PARADISE LANE DAYTONA BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

U00000822412
02/19/08-80067-004 150.00

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 119, 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:  **Oscar Roberts** **Feb 8, 2008** **386-437-6457**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #
Pres.