FILE OW: FILING FEE AFTER MAY 1 IS \$550.00

POFIT CORFORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 315010

(9)

COLLIER COUNTY ROOFING CORP

Sec	retar	y of	Stat	æ

FILED

Jul 23 1997 8:00am

Principal Pla	ice of Business	Mailing Address	a liberat sizat sizat Aliki Aniai sibir anii a	INDIA BIBIS BIBIS BIBIS BIBIS BIBIS COBS	
3927 EXCHAN NAPLES FL 3		3927 EXCHANGE AVE. NAPLES FL 34104-3737			
				3. Date Incorporated or Qualified 03/22/1967	3a. Date of Last Report 06/13/1996
2. Principal Place of Business 2a. Mailing Address				4. FEI Number	Applied For
21		26		59-1164505	Not Applicable
Suite, Apt	t. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Sta	ale	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zıp	Country	Zip	Country	B. This corporation has liability for in	ntangible tax under s. 199 032,
24	25	29	30		Yes No
	9. Name and Address of Currer	nt Registered Agent	04	10. Name and Address of New Reg	gistered Agent
	VINE, ALAN L.		81 Name	niel Gregory	
_	30 SHADOW LAWN DR STE 18		82 Street Aod	ress (P.O. Box Number is Not Acceptab	le)
NA	PLES FL 33962		392'	7 Exchange Que: _	
			83	•	
	1		84 Cdv ,		85 Zip Code .
			Na	ples ·	H 34104
11. Purauan office or	nt to the provisions of Sections 607.050 r registered agent, or both, in the State	02 and 607.1508, Florida Statut e of Florida, Such change was :	tes, the above-named cor authorize d by the corpora	poration submits this statement for the pation's board of directors. I hereby accept	urpose of changing its registered in the appointment as registered
agent. I	am familiar with, and accept the oblig	ations of, Section 607.0505, Fl	orida Statutes.	,	. 1 00
SIGNATURE	X 0				4.30.97
	 Signature, typed or printed name of registered agr 	ent and title it applicable (NOT ID DIRECTORS	E: Registered Agent signature requ		DATE
TITLE	PD OFFICERS AN	DELETE	13.	ADDITIONS/CHANGES TO OFFIC	Change Addition
NAME	PREWITT ARTHUR J	Deterie			Change Addition
	E464 4OT AUCKNIE NIW		1.2 NAME		
STREET ADDRESS	NAPLES FL		1.3 STREET ADDRESS		
CITY-ST-ZIP	VP	DELETE	2.1 TITLE		Change Addition
NAME	DOLL, PHILLIP E	_ bleefe	2.2 NAME 1		
STREET ADDRESS	SOOT EVOLUNIOE AVE		2.3 STREET ADDRESS		
	NAPLES FL				•
CITY-ST-ZIP	VP	DELETE	2 4 CHY-SI-ZIP 3 1 TITLE		Change Addition
NAME	DOLL, ROBERT D		3.2 NAME		
STREET ADDRESS	COOT EVOLUANCE AUCKNIE		3.3 STREET ADDRESS		
CITY-ST-ZIP	NAPLES FL		3 4. CITY-ST-ZIP		
TITLE	ST	DELETE	4.1 TITLE		Change Addition
NAME	DAVIS, RAMONA L.		4. 2 NAME		
STREET ADDRESS	AGAIT EVALUATION AVE		4.3 STREET ADDRESS		
CITY-ST-ZIP	NAPLES FL		4.4 CITY - S1 - ZIP		
TITLE	VP	DELETE	5.1 TITLE		Change Addition
NAME	PREWITT, MARY MARGARET		5.2 NAME		DΕ
STREET ADDRESS			5.3 STREET ADDRESS		12.27
CITY-ST-ZIP	NAPLES FL		5.4 CI3Y - S1 - 7IP		1.03
TITLE	SEC	DELETE	6.1 TITLE		Change Addition
NAME	FARINA, LAURIE		6.2 NAME	10000224 -07/24/970100	PO 022
STREET ADDRESS	3927 EXCHANGE AVE		6.3 STREET ADDRESS	-U1/24/91U1UL	J3U22
CITY-ST-ZIP	NAPLES FL		6.4 CITY - ST ZIP	***550 . 00	

I do 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 amphal report of supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trusted empswered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 at Block 13 if changed, or on an attachment with an address.

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