FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

Secretary of State

1996				16 B.	DIVISION OF CORPORATIONS							
DOCUMENT # 461484 1. Corporation Name SPIRES ROOFING, INC.					(8)			I 1881/4 8/8/8 RUGAL HUGA RUBAL HUGA BIRAL B				
4127 SPARTA ROAD					Mailing Address 4127 SPARTA ROAD							
	SEBRING FL	33872			SEBRING FL 33872							
									3. Date Incorporated or Qualified 09/23/1974	3a. Date	of Last Re 3/20/19	eport 95
Ò	Principa! Pla	ice of Busin	ess		2a. Maling Address				4. FEI Number 59-1607871		-	Applied For
21	Suite, Apt. #	. etc			Suite, Apt. #, etc.						بالسماحية	Not Applicable Additional
22				-	27				Cert ficate of Status Desired			Required
23	City & State]:	City & State				Election Campaign Financing Trust Fund Contribution			0 May Be d to Fees
	Zιρ		Country		Zip	Countr	у		8. This corporation has liability for	intangible ta	x under s	199.032,
24		g. Name	25 and Address		29 egistered Agent	_[3 0]			Florida Statutes X Yes 10. Name and Address of New F		Agent	
					_ <u>~</u>	8	ĭ	Name	: - : - : - : - : - : - : - : - :		-	
MARVIN SPIRES					6:	2	Street Addre	ess (P.O. Box Number is Not Acceptal	ile)			
4127 SPARTA RD. SEBRING FL 33870												
	OLDINA	u i E 3301	U			6:	1					
						84	3	City		FL	85 Zij	p Code
	or registere familiar wit GNATURE	ed agent, or h, and acce	both, in the St	ate of Florida. (ins of, Section (Such change was authoriz 607.0505, Florida Statutes	red by the cor s.	por	ration's board	ation submits this statement for the pu d of directors. Thereby accept the app	pose of Cha	registered	i agent. I am
12				ICERS AND D		13.			ADDITIONS/CHANGES TO OFF		DIRECTO	ORS IN 12
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4. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 of instee 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: _

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

2/29/96 (941)385-0779

CR2E034 (12/95)