

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

FILED
May 01, 1999 8:00 am
Secretary of State

05-01-1999 90010 017 ***150.00

DOCUMENT # 473418

1. Corporation Name

SUNCOAST ROOFERS SUPPLY, INC.

Principal Place of Business

2430 TERMINAL DRIVE SOUTH
ST. PETERSBURG FL 33712
US

Mailing Address

PO BOX 12587
ST. PETERSBURG FL 33733
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/02/1975

4. FEI Number

59-1583243

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 the current year Intangible
Personal Property Tax.

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

GREGORY, ROWLAND E J
7498 WATERSILK DR.
PINELLAS PARK FL 34666

10. Name and Address of New Registered Agent

81 Name

GREGORY, ROWLAND E. JR

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

2430 TERMINAL DRIVE SOUTH

83

84 City

ST PETERSBURG

FL

85 Zip Code

33712

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

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

(NOTE: Registered Agent signature required when reinstating)

4/26/99
DATE

12. OFFICERS AND DIRECTORS

TITLE PV
NAME GREGORY, ROWLAND E. JR.
STREET ADDRESS 7498 WATERSILK DR.
CITY-ST-ZIP PINELLAS PARK FL

☐ DELETE

TITLE TS
NAME TAMAYO, WILLIAM
STREET ADDRESS 14606 DARTMOOR LANE
CITY-ST-ZIP TAMPA FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
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CITY-ST-ZIP

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CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☒ Change

☐ Addition

1.2 NAME

1.3 STREET ADDRESS

2430 TERMINAL DRIVE SOUTH

1.4 CITY-ST-ZIP

ST PETERSBURG FL 33712

2.1 TITLE

☒ Change

☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2430 TERMINAL DRIVE SOUTH

2.4 CITY-ST-ZIP

ST PETERSBURG FL 33712

3.1 TITLE

☐ Change

☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

☐ Change

☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

☐ Change

☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
KATHERINE HARRIS
SECRETARY OF STATE

4/26/99
Date

727 327 7666
Daytime Phone #

CR2E034 (1/98)