05-01-1999 90010 017 \*\*\*150.00

## 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 # 473418 1. Corporation Name

SUNCOA	AST ROOFERS SUPPLY, INC	· ·		A LOCALIS ALBERT MADER SERIE OMBAT MORE TOTA ALBERT DIGHT ATALL ATALL ATALL ATALL ATALL ATALL ATALL
Principal Place	e of Business	Mailing Address		
2430 TERMINAL ST. PETERSBUR US	DRIVE SOUTH RG FL 33712	PO BOX 12587 ST. PETERSBURG FL 33733 US		DO NOT WRITE IN THIS SPACE
00		••		3. Date Incorporated or Qualifed
				04/02/1975
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number Applied For
21		26		59-1583243 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired   \$8.75 Additional Fee Required
City & State	8	City, & State		-6. Election Campaign Financing \$5.00 May Be
23		28		Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year intangible  Personal Property Tax  No.
24	25		30	Personal Property Tax. Sel Yes LiNo  10. Name and Address of New Registered Agent
	9. Name and Address of Current	Registered Agent	81 Name	
GRE	GORY, ROWLAND E J			GREGORY ROWLAND E. JR
	3 WATERSILK DR.		82 Street	et Address (P.O. Box Number is Not Acceptable)
	LLAS PARK FL 34666		83	2430 TERMINAL DRIVE SOUTH
			84 City	ST PETER SOURCE FL 85 Zip Code 33712
11. Pursuant office or re	to the provisions of Sections 607.0502 registered agent or both, in the State of	2 and 607.1508, Florida Statutes of Florida. Such change was aut	s, the above-named thorized by the corp	ed corporation submits this statement for the purpose of changing its registered reporation's board of directors. I hereby accept the appointment as registered
	The result of the second of the second	, constant of the section of the sec	ua Statutes.	ula. 169
SIGNATURE	Signature, tyled or printed name of registered agent	·		re required when reinstating) DATE
	I C Grand	t and title if applicable. (NOTE: F		re required when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
SIGNATURE	Signature, typed or printed name of registered agent OFFICERS ANI	t and title if applicable. (NOTE: F	Registered Agent signature	re required when reinstating) DATE
SIGNATURE	Signature, typed or printed name of registered agent OFFICERS AND PV GREGORY, ROWLAND E. JR.	t and title if applicable. (NOTE: F	Registered Agent signature	re required when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Addition  Addition
SIGNATURE  12.  TITLE	Signature, typed or printed name of registered agent OFFICERS ANI PV GREGORY, ROWLAND E. JR. 7498 WATERSILK DR.	t and title if applicable. (NOTE: F	Registered Agent signature 13. 1.1 TITLE	Te required when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition  SS 243. TELMINAL ORIUS SOUTH
SIGNATURE  12. TITLE NAME	Signature, typed or printed name of registered agent OFFICERS ANI PV GREGORY, ROWLAND E. JR. 7498 WATERSILK DR. PINELLAS PARK FL	t and title if applicable. (NOTE: FD DIRECTORS	Registered Agent signature 13. 1.1 TITLE 1.2 NAME	The required when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition  SS 243. TELMINAL ORIUE SOUTH  ST PETELS BURK FL 33712
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SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered agent OFFICERS ANI PV GREGORY, ROWLAND E. JR. 7498 WATERSILK DR. PINELLAS PARK FL TS TAMAYO, WILLIAM	t and title if applicable. (NOTE: FD DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY- ST-ZIP	The required when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition  Streetsburg Fl 33712  Change Addition
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STREET ADDRESS CITY-ST-ZIP 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 or the receiver of the corporation of the corp

SIGNATURE:

727 327 7666