

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 504698

**FILED**  
**Apr 15, 2010**  
**Secretary of State**

**Entity Name:** BAILLIE ROOFING & CONSTRUCTION, INC.

**Current Principal Place of Business:**

5409 PROVOST DR.  
HOLIDAY, FL 34690 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 187  
P O BOX 187  
ELFERS, FL 34680 US

**New Mailing Address:**

**FEI Number:** 59-1664808      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

TROXELL, BOBBY  
6753 RANCHWOOD LOOP  
NEW PORT RICHEY, FL 34653 US

**Name and Address of New Registered Agent:**

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.

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** TROXELL, BOBBY  
**Address:** 6753 RANCHWOOD LOOP  
**City-St-Zip:** NEW PORT RICHEY, FL

**Title:** VS  
**Name:** TROXELL, JENNITA  
**Address:** 6753 RANCHWOOD LOOP  
**City-St-Zip:** NEW PORT RICHEY, FL 34653

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

**SIGNATURE:** BOBBY J. TROXELL

PRES

04/15/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date