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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

557544

(4)

DOCUMENT # 1. Corporation Name

FORD ROOFING, INC.

Mailing Address



Principal Place	of Business	Mailing Address	Mairag Address 2974 ST. AUGUSTINE ROAD JACKSONVILLE FL 32207				
	ugustine road Ille fl 32207						
					3. Date Incorporated or Qualified 01/19/1978	3a. Date of Last 04/25/	
		2a. Mailing Address 26		4. FEI Number 59-1786570		Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Ζιρ 24	Country 25	Z(p)	Zip Country 30		8. This corporation has liability for intangible tax under s 199.032, Horida Statutes X Yes □ No		
	9. Name and Address of Current	Registered Agent			10. Name and Address of New F	tegistered Agent	
FORD,III, HENRY R. 2974 ST. AUGUSTINE ROAD JACKSONVILLE FL 32207				81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FI 85 Zip Code			
or register familiar wit SIGNATURE	ed agent, or both, in the State of Florida th, and accept the obligations of, Section signature, by storighted same of the best up as a	i. Such change was author η 607.0509, Florida Statute «Πτον γαλοποίο που	iles, the above nized by the corpors On Frantis (April 13.	oranon's bos	ration submits this statement for the purion of directors. I hereby accept the applications of the directors of the applications of the applicatio	DAT:	
12.	OFFICERS AND	DELETE	1. 1 T(TLE	r	ADDITIONS OF MALE 10 OF	Chance	
THILE	1	[] Deter				. ۰۰۰۰۰	,
NAME	FORD,III, HENRY R. 2974 ST. AUGUSTINE RD.		1.2 NAME				
STREET ADDRESS	i e		1 3 STREET				
CITY-ST-ZIP	JACKSONVILLE FL STD	DELETE	2 1 11LE	1 - 210		Chang	ge 🗍 Addition
TITLE	FORD, DIXIE L.	L'I peren	2 2 NAME				,- 🚨
NAME	2974 ST. AUGUSTINE RD.		2.3 STREET	*ODDECC			
STREET ADDRESS	JACKSONVILLE FL		23 SINLET				
CITY - ST - ZIP	SACKOOKVICEE 1 C	T DELFTE	3 1 11115	1-21-		☐ Chan	ge Addition
			3 2 NAME			_	
NAME			3.3 STREE	400RESS			
STREET ADDRESS			3.4 CHY 5				
CiTY-ST-Z.P TITLE		☐ DELETE	4 1 TiTLE			☐ Chan	ge 🔲 Add tion
NAME			4.2 NAME	ŀ			
STREET ADDRESS			4.3 STREET	ADDRESS			
CITY ST-ZIP			4.4 CiTY - S	.T - Z.P			
TITLE		DELETE	5 1 TITLE		. 220	Chan	ge 🔲 Addition
NAME		- :-	5.2 NAME				
STREET ADDRESS			5.3 STREET	ADDRESS			
			5.4 CiTy - 5				
CITY-ST-ZIP TITLE		☐ DELETE	6 1 HILE			☐ Chan	ge 🔲 Addition
		<u></u>	6.2 NAME			-	
NAME			63381868	ADDRESS			
STREET ADDRESS			64 Cily - 5	!			
CHTY-ST-ZIP	L	At at a factor or a to the same of the	■ 64 UIT-3		for the exemption stated in Section 119	07(39k) Florida St	atutes I furtner

14. I do hereby certify that the information supplied with this firety 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 ancient 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.

SIGNATURE: