

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 719006

1. Entity Name

FLORIDA ROOFING, SHEET METAL & AIR CONDITIONING

FILED
May 01, 2000 8:00 am
Secretary of State

05-01-2000 90481 043 ****61.25

Principal Place of Business 4111 METRIC DR PO DRAWER 4850 WINTER PARK FL 32792 US	Mailing Address 4111 METRIC DR PO DRAWER 4850 WINTER PARK FL 32792-6823 US
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State
Zip	Country

4. FEI Number 59-1269842	Applied For Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent MUNNELL, STEPHEN W 4111 METRIC DR WINTER PARK FL 32792	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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8. 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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ED MUNNELL, STEPHEN 4111 METRIC DR WINTER PARK FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GREENE, WILLIAM PO BOX 26069 N/A JACKSONVILLE FL ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/T Sutter, Steve 1763 Apex Rd Sarasota, FL 34240 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PE DOVE, JODY 1025 KISSIMMEE ST TALLAHASSEE F ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ENGELMEIER, CARL 4800 WOFFORD LN ORLANDO FL 32810 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PURDY, BOB 18 W. STUMPFIELD RD PENSACOLA FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GUSTAFSON, M POB 832 BOYNTON BCH FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PE ☒ Change ☐ Addition

12. 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 report or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 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

Stephen W. Munnell 4/24/00 407/671-3772

CR2E037 (9/99)