2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 16, 2006
Secretary of State

DOCUMENT# 751057

Entity Name: SOUTHWEST FLORIDA ROOFING CONTRACTORS ASSOCIATION, INC.

Current Principal Place of Business:

P.O. BOX 1446
FT MYERS, FL 33902

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1446
FT MYERS, FL 33902

New Mailing Address:

FEI Number: 59-1612921 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PETERSON, BROOKE
3000 SOUTH ST.
FORT MYERS, FL 33916 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

OFFICERS AND DIRECTORS:

Title:	S	( ) Delete
Name:	LIFTIG, DEBORAH	
Address:	11638 PLANTATION PRESERVE CIRCLE	
City-St-Zip:	FT MYERS, FL 33912	
Title:	P	( ) Delete
Name:	CUMMING, DAVE	
Address:	1106 SE 12TH COURT	
City-St-Zip:	CAPE CORAL, FL 33990	
Title:	T	( ) Delete
Name:	PETERSON, BROOKE	
Address:	3000 SOUTH ST.	
City-St-Zip:	FORT MYERS, FL 33916	
Title:	D	( ) Delete
Name:	RANDOL, TOM	
Address:	6260 METRO PLANTATION RD	
City-St-Zip:	FT MYERS, FL 33912	
Title:	V	( ) Delete
Name:	BRAAT, GUS	
Address:	2134 ANDREA LANE	
City-St-Zip:	FORT MYERS, FL 33912	
Title:	D	( ) Delete
Name:	BAILEY, MIKE	
Address:	3140-A KUTAK LANE	
City-St-Zip:	FT MYERS, FL 33916	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	(X) Change ( ) Addition
Name:	STRONG, WILLIAM	
Address:	3140-A KUTAK LANE	
City-St-Zip:	FT MYERS, FL 33916	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BROOKE PETERSON T 01/16/2006

Electronic Signature of Signing Officer or Director — Date