

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 06, 2005 8:00 am**  
**Secretary of State**

04-06-2005 90123 023 \*\*\*158.75

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|--|--|---|--|---|--|
| <b>DOCUMENT # F04000005473</b>   |  |   |  |   |  |
| <b>1. Entity Name</b><br>TEXXON RE-ROOFING INC.  |  |   |  |   |  |
| <b>Principal Place of Business</b><br>503 BRUCE CT.<br>OVILLA, TX 75154  |  |   | <b>Mailing Address</b><br>503 BRUCE CT.<br>OVILLA, TX 75154  |   |  |
| <b>2. Principal Place of Business</b><br>2650 NE DIXIE HWY   |  | <b>3. Mailing Address</b><br>PO BOX 786   |  |   |  |
| Suite, Apt. #, etc.  |  | Suite, Apt. #, etc.   |  |   |  |
| <b>City &amp; State</b><br>JENSEN BEACH, FL  |  | <b>City &amp; State</b><br>RED OAK, TX  |  | <b>4. FEI Number</b><br>20-1062954  |  |
| <b>Zip</b><br>34957  |  | <b>Country</b>  |  | <b>5. Certificate of Status Desired</b> <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b> |  |
| <b>6. Name and Address of Current Registered Agent</b><br>AGENTS AND CORPORATIONS, INC.<br>773 4TH AVENUE NORTH, STE. E<br>NAPLES, FL 34102  |  | <b>7. Name and Address of New Registered Agent</b><br>Name: Florida Re-Roofing<br>Street Address (P.O. Box Number is Not Acceptable): CURTIS DICKEY<br>2650 NE Dixie Hwy<br>City: Jensen Beach FL 34957 |  |   |  |
| <b>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. I am familiar with, and accept the obligations of registered agent.</b><br>SIGNATURE: <i>Curtis Dickey</i> President DATE: 4-1-05   |  |   |  |   |  |
| <b>9. Election Campaign Financing</b><br>Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>  |  |   |  |   |  |
| <b>FILE NOW!!! FEE IS \$150.00</b><br><b>After May 1, 2005 Fee will be \$550.00</b>  |  |   |  |   |  |
| <b>10. OFFICERS AND DIRECTORS</b>  |  |   | <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>   |   |  |
| TITLE: D <input type="checkbox"/> Delete<br>NAME: DICKEY, CURTIS<br>STREET ADDRESS: 503 BRUCE CT.<br>CITY-ST-ZIP: OVILLA, TX 75154   |  |   | TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition<br>NAME:<br>STREET ADDRESS:<br>CITY-ST-ZIP: |   |  |
| TITLE: <input type="checkbox"/> Delete<br>NAME:<br>STREET ADDRESS:<br>CITY-ST-ZIP:   |  |   | TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition<br>NAME:<br>STREET ADDRESS:<br>CITY-ST-ZIP: |   |  |
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| TITLE: <input type="checkbox"/> Delete<br>NAME:<br>STREET ADDRESS:<br>CITY-ST-ZIP:   |  |   | TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition<br>NAME:<br>STREET ADDRESS:<br>CITY-ST-ZIP: |   |  |
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| TITLE: <input type="checkbox"/> Delete<br>NAME:<br>STREET ADDRESS:<br>CITY-ST-ZIP:   |  |   | TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition<br>NAME:<br>STREET ADDRESS:<br>CITY-ST-ZIP: |   |  |
| <b>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 607, 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.</b> |  |   |  |   |  |
| <b>SIGNATURE:</b> <i>Curtis Dickey</i> DATE: 4-1-05 772-232-0701   |  |   |  |   |  |