APPROVED
AND
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06 SEP 15 PM 2:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F04000007094

1. Entity Name
BAKER-SOUTH ROOFING COMPANY

Principal Place of Business	Mailing Address
517 MERCURY STREET RALEIGH, NC 27603	P.O. BOX 26057 RALEIGH, NC 27611

DO NOT WRITE IN THIS SPACE

09062006 No Chg-P CR2E034 (11/05)

4. FEI Number
56-0130810

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

HAIRE, BRIAN
6121 N. ATLANTIC AVENUE, UNIT 108
CAPE CANAVERAL, FL

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
Due by September 15, 2006

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	PRES
NAME	BAKER, W. PRENTISS III
STREET ADDRESS	517 MERCURY STREET
CITY-ST-ZIP	RALEIGH, NC 27603
TITLE	~~VP~~ VP
NAME	BAKER, FRANK
STREET ADDRESS	517 MERCURY STREET
CITY-ST-ZIP	RALEIGH, NC 27603
TITLE	SEC
NAME	CATES, MELINDA
STREET ADDRESS	517 MERCURY STREET
CITY-ST-ZIP	RALEIGH, NC 27603
TITLE	TRES
NAME	BAKER, REBEKAH
STREET ADDRESS	517 MERCURY STREET
CITY-ST-ZIP	RALEIGH, NC 27603
TITLE	CEO
NAME	BALDWIN, R.L.
STREET ADDRESS	517 MERCURY STREET
CITY-ST-ZIP	RALEIGH, NC 27603
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

200073946252
09/19/06--01033--002 **150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

SIGNATURE: Rebekah Baker Rebekah Baker 9/12/06 9198882925
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

9/15
AD