

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000006671

FILED
Apr 16, 2009
Secretary of State

Entity Name: YOUNG ROOFING OF CENTRAL FLORIDA INC.

Current Principal Place of Business:

1054 CENTRAL INDUSTRIAL DR.
ST. LOUIS, MO 63110

New Principal Place of Business:

Current Mailing Address:

1054 CENTRAL INDUSTRIAL DR.
ST. LOUIS, MO 63110

New Mailing Address:

FEI Number: 43-0597205

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRABILL, ROBERT A
145 N. MAGNOLIA AVENUE
ORLANDO, FL 32801 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: V () Delete
Name: GREGORY, MARK S
Address: 2974 EGRETS LANDING DRIVE
City-St-Zip: LAKE MARY, FL 32746

Title: OST () Delete
Name: SLATTERY, JOHN J
Address: 740 EDWIN AVE
City-St-Zip: ST. LOUIS, MO 63122

Title: DVP () Delete
Name: MCGREW, GEORGE C
Address: 5780 OLD HICKORY BLVD.
City-St-Zip: NASHVILLE, TN 37218

Title: DP () Delete
Name: HATFIELD, WALTER O
Address: 5951 SUMMERHEDGE PLACE
City-St-Zip: ST. LOUIS, MO 63128

Title: DVP () Delete
Name: SUMMER, CARLTON R
Address: 8533 WASHINGTON WAY
City-St-Zip: GERMANTOWN, TN 38139

Title: OAS () Delete
Name: ALDRICH, SUSAN M
Address: 4085 ALMA
City-St-Zip: ST LOUIS, MO 63116

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
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WALTER O. HATFIELD

PRES

04/16/2009

Electronic Signature of Signing Officer or Director

Date