

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F07000006271

FILED
Mar 30, 2009
Secretary of State

Entity Name: SINGLES ROOFING CO., INC.

Current Principal Place of Business:

345 WILLARD AVE.
ELGIN, IL 60121

New Principal Place of Business:

936 EAST CHICAGO AVENUE
ELGIN, IL 60120

Current Mailing Address:

345 WILLARD AVE.
ELGIN, IL 60121

New Mailing Address:

936 EAST CHICAGO AVENUE
ELGIN, IL 60120

FEI Number: 36-3100720

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

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: SHERYL A. GIBBS, ASST. VP

03/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CPS () Delete
Name: DURCHSLAG, ROBERT A.
Address: 345 WILLARD AVE.
City-St-Zip: ELGIN, IL 60121

Title: T () Delete
Name: WELCH, DAWN
Address: 345 WILLARD AVE.
City-St-Zip: ELGIN, IL 60121

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CPS (X) Change () Addition
Name: DURCHSLAG, ROBERT A.
Address: 936 EAST CHICAGO AVENUE
City-St-Zip: ELGIN, IL 60120

Title: T (X) Change () Addition
Name: GALVAN, LUIS M
Address: 936 EAST CHICAGO AVENUE
City-St-Zip: ELGIN, IL 60120

Title: VP () Change (X) Addition
Name: WELCH, DAWN
Address: 936 EAST CHICAGO AVENUE
City-St-Zip: ELGIN, IL 60120

Title: VP () Change (X) Addition
Name: SCOTT, FRED
Address: 936 EAST CHICAGO AVENUE
City-St-Zip: ELGIN, IL 60120

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: ROBERT A. DURCHSLAG

CPS

03/30/2009

Electronic Signature of Signing Officer or Director

Date