

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 25, 2002 8:00 am
Secretary of State

02-25-2002 90041 034 ***150.00

DOCUMENT # F92000000655

1. Entity Name

BEST ROOFING TECHNOLOGY, INC.

Principal Place of Business

**POST OFFICE BOX 10803
 RALEIGH NC 27605**

Mailing Address

**POST OFFICE BOX 10803
 RALEIGH NC 27605**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

56-1616029

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**DEMELLO, WAYNE
 5810 TUKER RD
 JUPITER FL 33458**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DUDLEY, MARY 1108 NOWELL ROAD RALEIGH NC	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LIPPMAN, MARK 1108 NOWELL ROAD RALEIGH NC	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BARNES, DIANNE 1108 NOWELL ROAD RALEIGH NC	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BARNES, DAVID 1108 NOWELL ROAD RALEIGH NC	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BARNES, DAVID 1108 NOWELL ROAD RALEIGH NC	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP LIPPMAN, MARK 1108 NOWELL ROAD RALEIGH NC	☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Mary C. Dudley
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/22/02
 Date

(919) 51-5572
 Daytime Phone #

CR2E034 (9/01)