

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000004073

FILED
Jan 06, 2004
Secretary of State

Entity Name: ADUDELLE ROOFING & SHEET METAL, INC.

Current Principal Place of Business:

14220 S MERIDIAN
OKLAHOMA CITY, OK 73173 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 6594
MOORE, OK 731530594

New Mailing Address:

FEI Number: 73-1264918 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE, FL 32301 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: C () Delete
Name: ADUDELLE, TIMOTHY J
Address: 3116 COUNTRY CLUB
City-St-Zip: NEWCASTLE, OK 73065

Title: ST () Delete
Name: ADUDELLE, RUTH
Address: 3116 COUNTRY CLUB
City-St-Zip: NEWCASTLE, OK 73065

Title: P () Delete
Name: CRAWFORD, TIMOTHY N
Address: 2502 S 24TH ST
City-St-Zip: CHICKASHA, OK 73018

Title: VP () Delete
Name: COLLINS, BOB
Address: 1005 W FRANKLIN RD
City-St-Zip: NORMAN, OK 73069

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
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: TIM ADUDELLE

C

01/06/2004

Electronic Signature of Signing Officer or Director

_____ Date