

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 18, 2004 8:00 am
Secretary of State

03-18-2004 90013 008 ***158.75

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1. Entity Name
**ROANOKE ROOFING AND SHEET METAL COMPANY,
INC.**



Principal Place of Business
**930 3RD STREET
VINTON, VA 24179 US**

Mailing Address
**PO BOX 12607
ROANOKE, VA 24027**

44018943



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01062004

Chg-P

CR2E034 (10/03)

4. FEI Number

54-1007382

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**STEWART, JOSEPH D
2761 AIRPORT RD., S., #302
NAPLES, FL 33962**

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

SIGNATURE

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

(NOTE: Registered Agent signature required when resigning.)

DATE

**FILE NOW!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PDC** ☐ Delete
NAME **BOWLES, CABELL B**
STREET ADDRESS **110 GANGPLANK CIRCLE**
CITY-ST-ZIP **MONETA, VA 24121**

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

TITLE **V** ☐ Delete
NAME **PADGETT, STEVE**
STREET ADDRESS **739 WHITE OAK ROAD**
CITY-ST-ZIP **ROANOKE, VA 24018**

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

TITLE **S** ☐ Delete
NAME **SHEPARD, SANDRA M**
STREET ADDRESS **548 WOODED ACRES DRIVE**
CITY-ST-ZIP **HARDY, VA 24101**

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

TITLE **TD** ☐ Delete
NAME **LAFERTY, ALLISON**
STREET ADDRESS **7961 FOREST EDGE ROAD**
CITY-ST-ZIP **ROANOKE, VA 24018**

TITLE ☒ Change ☐ Addition
NAME **LAFERTY, ALLISON**
STREET ADDRESS **385 CLAYBANKS DRIVE**
CITY-ST-ZIP **CALLAWAY, VA 24067**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

12. 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 507, 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: *Cabell Bowles*

CABELL BOWLES

1/13/2004

540-344-4100

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone