

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G47791

FILED
Mar 04, 2009
Secretary of State

Entity Name: COMMERCIAL ROOFING, INC.

Current Principal Place of Business:

2185 AVOCADO AVE
MELBOURNE, FL 32935 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 361667
MELBOURNE, FL 32936

New Mailing Address:

FEI Number: 31-1068729 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MYNHEIR, LORI L
912 EASTERWOOD CT SE
PALM BAY, FL 32909 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: CEO () Delete
Name: MITCHELL, RONALD C
Address: 3625 CARRIAGE GATE DR
City-St-Zip: MELBOURNE, FL 32904

Title: S () Delete
Name: MITCHELL, JUDITH
Address: 3625 CARRIAGE GATE DR
City-St-Zip: MELBOURNE, FL 32904

Title: T () Delete
Name: MYNHEIR, LORI
Address: 912 EASTERWOOD CT SE
City-St-Zip: PALM BAY, FL 32909

Title: P () Delete
Name: MITCHELL, RONALD L
Address: 683 GEDDES ST SW
City-St-Zip: PALM BAY, FL 32908

Title: VP () Delete
Name: MITCHELL, RICHARD M
Address: 158 COPENHAVER AVE NE
City-St-Zip: PALM BAY, FL 32907

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:

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: LORI L. MYNHEIR

_____ Electronic Signature of Signing Officer or Director

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03/04/2009

_____ Date