| 2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # G71441 1. Entity Name TURNER ROOFING COMPANY, INC. | | | | | | FILED May 08, 2000 8:00 am Secretary of State 05-08-2000 90058 018 ***150.00 | | | | |
|---|---|---|------------------------------------|-------------------------------------|--------------|---|--|--------------------|---------------------------|------------|
| Principal Place of Business Mailing Address | | | | | | | | | | |
| 8049 MONETARY | | P.O. BOX 12455 | | | | | | | | |
| D-7 Rivera Beach | FL 33404 | lake park fl 33403-0455 US | | | | | | | | |
| US | | | | | | | | | | |
| 2. Principal Place of Business | | 3. Mailing Address | | | | | | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | | | DO NOT WRIT | E IN THIS S | PACE | |
| City & State | | City & State | | | 4. F | El Number | | <u> </u> | Ap | plied For |
| City & State | | | | | | 59-2307234 | | | Not Applicable | |
| Zip | Country | Zip . | Coun | try | 5. C | Certificate of | Status Desired | | \$8.75 Ado Fee Require | |
| | 6. Name and Address of Current | Registered Agent | · | | 7. N | lame and A | ddress of New R | egistered A | gent | |
| • | | | Name | | | | | | | |
| | ier, jr. j reid 5 wind Flower Dr. | فيتدرج والمراجع | | Street Addre | ss (P.O.,B | s (P.O., Box Number is Not Acceptable) | | | | بي المستر |
| | BCH GARDENS FL 33418 | | | | | | | | | |
| | | | | City | | | ······································ | FL | Zip Cod | e |
| | named entity submits this statement for | | | | internal and | ant or both | in the State of Ele | | | |
| 9. This corpo | Signature, typed or printed name of registered agent ration is eligible to satisfy its Intangible equirement and elects to do so. | | !!! FEE | • | | 10. Elect | ion Campaign Fin | | | O May Be |
| • | ia on back) | Make Check Payal | ble to D | | State | | | | | |
| 11. | OFFICERS AND | | <u>12.</u> TITL | F | AD | DITIONS/C | HANGES TO OFF | ICERS AND | DIRECTOR: | Addition |
| NAME STREET ADDRESS CITY-ST-ZIP | TURNER, JOSEPH JR. 13955 WIND FLOWER DR. PALM BEACH GARDENS FL | | NAM STRI | | | | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | 🗋 Delete | | | | | | | Change | Addition |
| TITLE NAME | | Delete | TITL | E | | | | | Change | Addition |
| STREET ADDRESS CITY-ST-ZIP | | | _ | -ST-ŽIP | • | · · | - | | | |
| TITLE NAME STREET ADDRESS | | Delete | _ | IE EET ADDRESS | | | | | 🔲 Change | 🛄 Addition |
| CITY-ST-ZIP | | Delete | TITL | E | | | | | Change | Addition |
| NAME STREET ADDRESS CITY-ST-ZIP | | | NAN STR | | | | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | Delete | | | | | | | Change | Addition |
| 13. I hereby c indicated of the cor | URE: | is true and accurate and that powered to execute this report | my signa t as requ 1. RED | iture shall have ired by Chapter | | | | e appears in 56 | | |