## **FILED**

Jul 26, 2001 8:00 am

1. Entity Nam	MENT # H1591 RPROOF, INC.	9		Secretary of 07-26-2001 90004 013		<b></b>	
Principal Place of Business 142 OAKVIEW CIRCLE LAKE MARY FL 32746		Mailing Address 142 OAKVIEW CIRCLE LAKE MARY FL 32746					
2. Principal Place of Business		3. Mailing Address			I UIRIN ERAN UIRIN DÄI -		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE			
City & State	te City & State			4. FEI Number 59-2457622	<u> </u>	lied For Applicable	
Zip	Country	Zip	Country	5. Certificate of Status Desired	\$8.75 Addit Fee Required	ional	
6Name and Address of Current Registered Agent  Name				7. Name and Address of New Registered	Agent		
MARTIN, THOMAS 142 OAKVIEW CIRCLE			Street Address	Street Address (P.O. Box Number is Not Acceptable)			
LAKE MARY FL 32746			City	F	Zip Code		
8. The above named entity submits this statement for the purpose of manging 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 elligible to satisfy its Intangible  Tax filips required most and elects to do so.  After Sentember 12, 2001 Fee will be \$750.00  10. Election Campaign Financing  \$5.00 May Be							
(See criter	equirement and elects to do so.	After September 12, 2 Make Check Payable	to Department of Sta	Trust Fund Contribution.	Added t	o Fees	
THILE NAME STREET ADDRESS CITY-ST-ZIP	P MARTIN, THOMAS 142 OAKVIEW CIRCLE LAKE MARY FL 32746	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFICERS AN	ND DIRECTORS  Change	IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MARTIN, WANDA K 142 OAKVIEW CIRCLE LAKE MARY FL 32746	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change	Addition	
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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 reported 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.

GNATURE:

GNATURE:

SIGNATURE:

OFFICER OR DIRECTOR

**2001 UNIFORM BUSINESS REPORT (UBR)** 

## Norbert N. Young

attachment A0079588

Certified Public Accountant 25 South Magnolia Orlando, Florida 32801 (407) 422-1530

July 21, 2001

Division of Corporations P.O. Box 1500 Tallahassee, FL 32302

## Gentlemen,

It has come to our attention that above referenced annual report was not filed by the above referenced corporation. Included please find a copy of the annual report as well as a check in the amount of \$150.00 for the annual filing fee. We are respectfully requesting to pay the original filing fee amount instead of the delinquent fee amount due to reasonable cause as follows:

- (1) The company evidently did not receive the first notice due to moving their offices during the first part of 2001.
- (2) The company is a small roofing repair business and cannot afford this large additional amount due.
- (3) As soon as the corporation realized the annual report had not been filed they immediately contacted an accountant, prepared the form, and sent the original amount due.

Thank you very much for your anticipated cooperation and understanding with this matter. As always feel free to contact us with any questions or comments concerning this or any other matter.

Very truly yours,

Norbert N. Young, CPA

Tom Martin, President, Weatherproof, Inc.