

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morfitt
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H29571

(7)

1. Corporation Name

G. & R. ROOFING COMPANY, INCORPORATED



Principal Place of Business

C/O TIMOTHY REVELS
6251 PARK BLVD STE 8
PINELLAS PARK FL 34665

Mailing Address

C/O TIMOTHY REVELS
6251 PARK BLVD STE 8
PINELLAS PARK FL 34665

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

3. Date Incorporated or Qualified
11/30/1984

3a. Date of Last Report
04/26/1995

4. FID Number
59-2466463

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

REVELS, TIMOTHY L
6251 PK BLVD STE 8
PINELLAS PARK FL 34665

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0602 and 607.1505, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

(Signature of person or persons authorized to sign this statement)

(Signature of person or persons authorized to sign this statement)

(Signature)

12. OFFICERS AND DIRECTORS

TITLE V ☐ DELETE
NAME KNAPPENBERGER, MICHAEL
STREET ADDRESS 4920 33RD TERR N
CITY-ST-ZIP ST PETERSBURG FL

TITLE P ☐ DELETE
NAME REVELS, TIMOTHY L.
STREET ADDRESS 9909-62ND ST., N.
CITY-ST-ZIP PINELLAS PARK FL

TITLE S ☐ DELETE
NAME HALE, FRED H
STREET ADDRESS 5369 PARK BLVD.
CITY-ST-ZIP PINELLAS FL

TITLE T ☐ DELETE
NAME HALE, FRED
STREET ADDRESS 5369 PARK BLVD.
CITY-ST-ZIP PINELLAS PARK FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

11 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(c), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Timothy L. Revels, Pres. 4-17-96 813-541-6668
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)