

**2000 UNIFORM BUSINESS REPORT (UBR)****DOCUMENT # H35967**

1. Entity Name

**CARDINAL ROOFING & SIDING OF FLORIDA, INC.****FILED**  
**Aug 21, 2000 8:00 am**  
**Secretary of State**

08-21-2000 90211 013 \*\*\*550.00

Principal Place of Business  
1682 SE S NIE MEYER CIRCLE  
PORT ST LUCIE FL 34952Mailing Address  
1682 SE S NIE MEYER CIRCLE  
PORT ST LUCIE FL 34952

2. Principal Place of Business

3. Mailing Address

P.O. Box 333

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

BRICK New Jersey

Zip

Country

Zip

08723

Country

ONi TAO STATE

4. FEI Number

59-2498442

Applied For

Not Applicable

5. Certificate of Status Desired ☐\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

KOEBE, BRUCE A.  
2477 NE DIXIE HWY  
JENSEN BCH. FL 34957

7. Name and Address of New Registered Agent

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.

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 eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐**FILE NOW!!! FEE IS \$550.00**  
**After SEPTEMBER 13, 2000 Min. will be \$750.00**  
**Make Check Payable to Department of State**10. Election Campaign Financing  
Trust Fund Contribution. ☐\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DP  
HENRY, PHILIP J.  
1682 SE S NIE MEYER CIR  
PORT ST LUCIE FL ☒ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
President  
William Kelly  
11 Gail Ave Circle  
Bellevue N.J. 07718 ☐ Change ☒ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Vice President  
BRAD HOSAN  
1 HICKORY RD  
Sewells Point Florida ☐ Change ☒ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

13. 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 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/14/00  
Date722-458-9222  
Daytime Phone #

CR2E034 (5/00)