2002 UNIFORM BUSINESS REPORT (UBR)

Jan 31, 2002 8:00 am H71312 DOCUMENT # **Secretary of State** 1. Entity Name PALMER METAL & ROOFING SYSTEMS, INC. 01-31-2002 90093 033 ***150.00 Principal Place of Business Mailing Address 636 WILKIE ST 636 WILKIE ST **DUNEDIN FL 34698 DUNEDIN FL 34698** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-2570371 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent PALMER, HUGH Street Address (P.O. Box Number is Not Acceptable) 636 WILKIE ST. **DUNEDIN FL 34698** City 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. SIGNATU DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Addition PALMER, SCOTT H. NAME NAME 2824 N CENTRAL AVE STREET ADDRESS STREET ADDRESS tampa fl CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE Addition PALMER, GREGORY M. NAME NAME 2512 NASSAU LANE FT. LAUDERDALE, FL 333 1508 N 15TH TERRACE STREET ADDRESS STREET ADDRESS HOLLYWOOD FL 33020 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition PALMER, CHRISTOPHER A. NAME ·· NAME 611 28TH AVENUE STREET ADDRESS STREET ADDRESS ST. PETERSBURG FL CITY-ST-7IP CITY-ST-7IP TITLE ☐ Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITL F ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS

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

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

JAN. 16, 2002 727-73

(9/01)