2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2005
Secretary of State

DOCUMENT# H74045

Entity Name: PILCHER ROOFING, INC.

Current Principal Place of Business:

5360 MCINTOSH POINT
SUITE 122
SANFORD, FL 32773

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 520177
LONGWOOD, FL 32759

New Mailing Address:

FEI Number: 59-2595219 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BARNES, STEVE A.
1900 S. PARK AVENUE
SANFORD, FL 32771 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: EVP ( ) Delete
Name: BARNES, STEVE II,
Address: 4325 MELLOWVILLE AVE
City-St-Zip: SANFORD, FL 32773

Title: P ( ) Delete
Name: BARNES,STEVE,
Address: 1900 S. PARK AVENUE
City-St-Zip: SANFORD, FL

Title: ST ( ) Delete
Name: BARNES, ANN,
Address: 1900 S. PARK AVENUE
City-St-Zip: SANFORD, FL

Title: ST ( ) Delete
Name: BARNES, JOHN,
Address: 535 REDDITT ROAD
City-St-Zip: OSTEEN, FL

Title: VP ( ) Delete
Name: SHELTON, CYNTHIA
Address: 4233 MEETING PLACE
City-St-Zip: SANFORD, FL 32773

Title: VP ( ) Delete
Name: BARNES, RICHARD D.,
Address: 240 SHERYL DRIVE
City-St-Zip: DELTONA, FL 32738

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEVE BARNES II EVP 04/29/2005

Electronic Signature of Signing Officer or Director Date