

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H74045

FILED
May 01, 2007
Secretary of State

Entity Name: PILCHER ROOFING, INC.

Current Principal Place of Business:

5324 MCINTOSH POINT
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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: EVP () Delete
Name: BARNES, STEVE II,
Address: 4325 MELLONVILLE 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 exemption stated in Chapter 119, 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

05/01/2007

Electronic Signature of Signing Officer or Director

Date