

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 02, 2007 08:00 AM
Secretary of State

DOCUMENT # H92738

1. Entity Name
ROOF LIFE, INC.



Principal Place of Business
902 CHAPEL HILL BLVD
BOYNTON BEACH, FL 33435

Mailing Address
902 CHAPEL HILL BLVD
BOYNTON BEACH, FL 33435



01242007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2615767

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HEFFERNAN, MARGARET A.
902 CHAPEL HILL BLVD.
BOYNTON BEACH, FL 33435

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Margaret A. Heffernan

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

1-25-07

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U00000618079
02/08/07-80016-003 150.00

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	HEFFERNAN, JOHN P.
STREET ADDRESS	600 WHISPERING PINE RD.
CITY-ST-ZIP	BOYNTON BEACH, FL 33435
TITLE	STVP
NAME	HEFFERNAN, MARGARET A.
STREET ADDRESS	902 CHAPEL HILL BLVD.
CITY-ST-ZIP	BOYNTON BCH, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Margaret A. Heffernan
MARGARET A. Heffernan

1-25-07

Date

561737-1813

Daytime Phone #