

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J31504

Entity Name: CUSTOM ROOFING, INC.

FILED  
Apr 23, 2008  
Secretary of State

## Current Principal Place of Business:

11580 CHITWOOD DR  
UNIT 101  
FORT MYERS, FL 33908

## New Principal Place of Business:

11258 PINEY RD  
N. FORT MYERS, FL 33903

## Current Mailing Address:

P.O. BOX 802  
SANIBEL, FL 33957

## New Mailing Address:

P.O. BOX 08058  
FORT MYERS, FL 33908

FEI Number: 59-2713187

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BRESSANELLI, DONNA  
11580 CHITWOOD DR  
FORT MYERS, FL 33908 US

## Name and Address of New Registered Agent:

BRESSANELLI, DONNA  
12350 MCGREGOR PALMS DR  
FORT MYERS, FL 33908 US

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: DONNA BRESSANELLI

04/23/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSD ( ) Delete  
Name: BRESSANELLI, DONNA  
Address: 1612 SERENITY LANE  
City-St-Zip: SANIBEL, FL 33957

Title: VTD ( ) Delete  
Name: GRATKOWSKI, RONALD  
Address: 1612 SERENITY LANE  
City-St-Zip: SANIBEL, FL 33957

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change ( ) Addition  
Name: BRESSANELLI, DONNA  
Address: 12350 MCGREGOR PALMS DR  
City-St-Zip: FORT MYERS, FL 33908

Title: VTD (X) Change ( ) Addition  
Name: GRATKOWSKI, RONALD  
Address: 12350 MCGREGOR PALMS DR  
City-St-Zip: FORT MYERS, FL 33908

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: DONNA BRESSANELLI

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04/23/2008

Electronic Signature of Signing Officer or Director

Date