## 1-20-98 B- 0337- C FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

	MENT # J94831 ROOFING SUPPLY, INC.	(1)			1160 1180 1180 1180 1180 1180
Principal Plac	e of Business	Mailing Address		1 1681/118 WINE 1811/ BISBN 1811/80 11181 1181 BISM 1818/1	AFAIT OTEIN BURNT ATANI IAAN
1207-44TH AVE EAST Bradenton FL 34203		1207-44TH AVE EAST BRADENTON FL 34203		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
2. Principal P	Place of Business	2a. Mailing Address		09/30/1987 4. FE! Number	Applied For
21		26		65-0007270	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		5. Celtificate of Status Desired	Fee Required
City & Stat	le	City & State		6. Election Campaign Financing	\$5.00 May Be
23 Zip	Country	<b>28</b>	Country	Trust Fund Contribution	Added to Fees
24	25	29 3	¬ ·	This corporation owes or has paid the cur     Personal Property Tax due June 30.	Yes No
	9, Name and Address of Current		<del>"                                     </del>	10. Name and Address of New Registered	<del></del>
SA	MUELS, WILLIAM F.		81 Name		
1207 44TH AVENUE EAST			82 Street Add	dress (P.O. Box Number is Not Acceptable)	<del></del>
BRADENTON FL 34203					
			83		
			84 City	FL	85 Zip Code
]					
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE				ured when reinstating) DATE	
12.	Signature, typed or printed name of registered agent		Registered Agent signature requ	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12
TITLE	PDT	DELETE	1.1 TITLE	About city of a state of the city of the	☐ Change ☐ Addition
NAME	SAMUELS, WILLIAM F.	-	1.2 NAME		
STREET ADDRESS	4305 MORGAN JOHNSON RD.		1.3 STREET ADDRESS		
CITY-ST-ZIP	BRADENTON FL		1.4 CiTY+ST-ZiP		
TITLE	VO	☐ DELET <b>e</b>	2.1 TITLE		Change Addition
NAME	GLASGOW, LOYD H.		2.2 NAME		j
STREET ADDRESS	1209 44TH AVE. E.		2.3 STREET ADDRESS		
CITY-ST-ZIP	BRADENTON FL		2.4 CITY - ST - ZIP		
TITLE	VMS	[] DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	<b>BOUCHARD, RICHARD</b> J.		3.2 NAME		
STREET ADDRESS	3620 34TH ST. E		3.3 STREET ADDRESS		ļ
CITY-ST-ZIP	BRADENTON FL	Dructe	3.4. CITY-ST-ZIP		Change I delition
TITLE		DELETE	4.1 TITLE		Change Addition
NAME OTDEET ADODESE		;	4.2 NAME		ļ
STREET ADDRESS			4.3 STREET ADDRESS		l
CITY-ST-ZIP TITLE		DELETE	4.4 CITY - ST - ZIP 5.1 TITLE		Change Addition
NAME		F-1 Perceip	5.2 NAME		
STREET ADDRESS		l	5.3 STREET ADDRESS		ľ
CITY-ST-ZIP			54 City-St-Zip		
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addition

14. Thereby 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

1 -6-98 941-755-7003 1-6-98

6.2 NAME

941-755-7003

**FILED** 

Jan 20 1998 8:00am

Secretary of State

NAME

STREET ADDRESS