# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 30, 2009**
**Secretary of State**

DOCUMENT# J95022

**Entity Name:** ALBERT PINAMONTI ROOFING CONTRACTOR, INC.

**Current Principal Place of Business:**

1299 STARKEY ROAD
#301
LARGO, FL 33771 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 867
LARGO, FL 33779 US

**New Mailing Address:**

**FEI Number: 59-2850325** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

PINAMONTI, ALBERT
4215 EAST BAY DRIVE
SUITE 1505-H
CLEARWATER, FL 33764 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: DP ( ) Delete
Name: PINAMONTI, ALBERT
Address: 4215 EAST BAY DRIVE #1505-H
City-St-Zip: CLEARWATER, FL 33764

Title: V ( ) Delete
Name: PINAMONTI, ALEXANDER
Address: 3488 BEGONIA PL.
City-St-Zip: LARGO, FL 33771 US

Title: V ( ) Delete
Name: PINAMONTI, BRIAN
Address: 8020 ABERDEEN CIRCLE
City-St-Zip: LARGO, FL 33773 US

Title: ST ( ) Delete
Name: PINAMONTI, DEBRA
Address: 4215 EAST BAY DRIVE #1505-H
City-St-Zip: CLEARWATER, FL 33764 US

**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:

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: ALBERT PINAMONTI DPAL 04/30/2009

Electronic Signature of Signing Officer or Director Date