

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

6399-0041

FILED
Apr 21, 2004 8:00 am
Secretary of State

04-21-2004 90452 043 ****50.00

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1. Entity Name
UNIFLEX ROOFING SYSTEMS-GULF COAST LLC

Principal Place of Business

**8750 ENTERPRISE BOULEVARD
LARGO, FL 33773**

Mailing Address

**1499 Enterprise Parkway
Twinsburg, OH 44087**

44043008

Please note mailing address chg.



DO NOT WRITE IN THIS SPACE

01232004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number

27-0041719

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324**

**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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2004**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
KESSLER, DAVID
8750 ENTERPRISE BOULEVARD
LARGO, FL 33773**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
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IN THIS SPACE**

11. I hereby 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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

4-14-04