

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000064745

Entity Name: A.G. ROOFERS, LLC

FILED
Apr 19, 2006
Secretary of State

Current Principal Place of Business:

1074 TROWBRIDGE COURT
LONGWOOD, FL 32714

New Principal Place of Business:

Current Mailing Address:

475 MONTGOMERY PLACE
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

FEI Number: 27-0100472

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KELLEY, GOLDBERG, LEACH & COHN PL
475 MONTGOMERY PLACE
ALTAMONTE SPRINGS, FL 32714 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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: GORTMAKER, AARON
Address: 1074 TROWBRIDGE COURT
City-St-Zip: LONGWOOD, FL 32750

Title: MBR () Delete
Name: GUILLEN, ABEL
Address: 1502 N. ALAFAYA TRAIL
City-St-Zip: ORLANDO, FL 32828

Title: MBR () Delete
Name: HOPWOOD, FREDERICK W
Address: 1502 N. ALAFAYA TRAIL
City-St-Zip: ORLANDO, FL 32828

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: GORTMAKER, AARON
Address: 1074 TROWBRIDGE COURT
City-St-Zip: LONGWOOD, FL 32750

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 for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: AARON GORTMAKER

MGRM

04/19/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date