2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 12, 2006
Secretary of State

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Entity Name: THE OHIO ROOFING COMPANY, L.L.C.

Current Principal Place of Business:

2760 RIVERSIDE LANDING DRIVE
NAVARRE, FL 32566

New Principal Place of Business:

Current Mailing Address:

2760 RIVERSIDE LANDING DRIVE
NAVARRE, FL 32566

New Mailing Address:

FEI Number: 34-1817404 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PENN, MICHAEL L
2760 RIVERSIDE LANDING DRIVE
NAVARRE, FL 32566 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: MGR ( ) Delete
Name: PENN, MICHAEL L
Address: 2760 RIVERSIDE LANDING DRIVE
City-St-Zip: NAVARRE, FL 32566

Title: MGRM ( ) Delete
Name: MILLER, JAMES A
Address: 9115 EAGLENEST DRIVE
City-St-Zip: NAVARRE, FL 32566

Title: MGRM ( ) Delete
Name: COTTON, DEMITRIUS
Address: 944 POPPLETON PLACE LANE
City-St-Zip: PATASKALA, OH 43086

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change ( ) Addition
Name: PENN, MIDALE
Address: 2760 RIVERSIDE LANDING DR
City-St-Zip: NAVARRE, FL 32566

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: MICHAEL L. PENN MGR 04/12/2006

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