2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 14, 2009
Secretary of State

DOCUMENT# L06000028384

Entity Name: EAGLE ROOFING PRODUCTS FLORIDA LLC

Current Principal Place of Business:

1575 EAST CR 470
SUMTERVILLE, FL 33585 US

New Principal Place of Business:

Current Mailing Address:

3546 N RIVERSIDE AVE
RIALTO, CA 92377 US

New Mailing Address:

FEI Number: 20-4513025 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SENA, ROBERT MGR
1575 EAST CR 470
SUMTERVILLE, FL 33585 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:	BURLINGAME, ROBERT C	
Address:	3546 N RIVERSIDE AVE	
City-St-Zip:	RIALTO, CA 92377 US	
Title:	MGR	( ) Delete
Name:	BURLINGAME, SEAMUS P	
Address:	3546 N RIVERSIDE AVE	
City-St-Zip:	RIALTO, CA 92377 US	
Title:	MGR	( ) Delete
Name:	BURLINGAME, KEVIN C	
Address:	3546 N RIVERSIDE AVE	
City-St-Zip:	RIALTO, CA 92377 US	
Title:	MGR	( ) Delete
Name:	ANDERSON, JOE H JR	
Address:	BOX 38, STATE ROAD 349 NORTH	
City-St-Zip:	OLD TOWN, FL 32680 US	
Title:	MGR	( ) Delete
Name:	ANDERSON, JOE H III	
Address:	BOX 38, STATE ROAD 349 NORTH	
City-St-Zip:	OLD TOWN, FL 32680 US	
Title:	MGR	( ) Delete
Name:	ANDERSON, M. D	
Address:	BOX 38, STATE ROAD 349 NORTH	
City-St-Zip:	OLD TOWN, FL 32680 US	

ADDITIONS/CHANGES:

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:	
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 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: KEVIN C BURLINGAME MGR 04/14/2009

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