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FILED

May 13 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L70058

(7)

1. Corporation Name

GORDON ROOFING COMPANY

Principal Place of Business

% CLOYCE FRANKLIN GORDON III
38208 GRAYS AIRPORT RD
LADY LAKE FL 32159

Mailing Address

% CLOYCE FRANKLIN GORDON III
38208 GRAYS AIRPORT RD
LADY LAKE FL 32159-4706

3. Date Incorporated or Qualified

05/01/1990

3a. Date of Last Report

06/05/1996

4. FEI Number

59-3005544

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

9. Name and Address of Current Registered Agent

GORDON III, CLOYCE FRANKLIN
38208 GRAYS AIRPORT RD
LADY LAKE FL

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DP
NAME GORDON, CLOYCE F III
STREET ADDRESS 38208 GRAYS AIRPORT RD.
CITY-ST-ZIP LADY LAKE FL ☐ DELETE

TITLE D
NAME GORDON, CAROL LOUISE
STREET ADDRESS 38208 GRAYS AIRPORT RD.
CITY-ST-ZIP LADY LAKE FL ☐ DELETE

TITLE V
NAME REVELS, JAMES D.
STREET ADDRESS 3430 DESERT LANE
CITY-ST-ZIP GROVELAND FL 34726 ☐ DELETE

TITLE V
NAME CARTER, JOHN E
STREET ADDRESS WHEELCOCK MOTOR CT 24926 S HWY 27
CITY-ST-ZIP LEESBURG FL ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE SAME ☐ Change ☒ Addition
4.2 NAME
4.3 STREET ADDRESS 1325 North 14th Street #6
4.4 CITY-ST-ZIP Leesburg, Florida 34748

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address

CR2E034 (9/96)