

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000004356

FILED
Jan 12, 2009
Secretary of State

Entity Name: ROOFING SUPPLY GROUP ORLANDO, LLC

Current Principal Place of Business:

2300 PRINCIPAL ROW, STE 101
ORLANDO, FL 32837

New Principal Place of Business:

Current Mailing Address:

3890 W. NORTHWEST HWY.
SUITE 400
DALLAS, TX 75220

New Mailing Address:

FEI Number: 20-1793153

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: ROOFING SUPPLY GROUP, , LLC
Address: 3890 W. NORTHWEST HWY., STE. 400
City-St-Zip: DALLAS, TX 75220

Title: MGR () Delete
Name: BREAU, DARREN
Address: 2300 PRINCIPAL ROW SUITE 101
City-St-Zip: ORLANDO, FL 32837

Title: CEO () Delete
Name: PERELLA, VIN
Address: 3890 W. NORTHWEST HWY., STE. 400
City-St-Zip: DALLAS, TX 75220

Title: CFO () Delete
Name: FARRELL, MIKE
Address: 3890 W. NORTHWEST HWY., STE. 400
City-St-Zip: DALLAS, TX 75220

Title: VPFS () Delete
Name: DAVENPORT, CECILIA
Address: 3890 W. NORTHWEST HWY., STE. 400
City-St-Zip: DALLAS, TX 75220

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: COO (X) Change () Addition
Name: FARRELL, MIKE
Address: 3890 W. NORTHWEST HWY., STE. 400
City-St-Zip: DALLAS, TX 75220

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: LISA GOLD, GC OF MANAGING MEMBER

GC

01/12/2009

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