

FLORIDA DEPARTMENT OF STATE

Secretary of State DIVIDION OF CODDODATIONS

Katherine Harris

FILED Mar 01, 1999 8:00 am Secretary of State

	1999			03-01-1999 90105 007	' ***150.00
DOCUMENT # M68199 1. Corporation Name					
A-PLUS ROOFING OF KEY WEST, INC.				1	
) 188/18/1/198 1/18/1/18/19/19/19/18/18/18/18/18/18/18/18/18/18/18/18/18/	
l	·				
Principal Place	e of Business	Mailing Address			6,Br. e.a., 616., 2,21. e.d.,
2123 FLAGLER AVE 1107 KEY PLAZA					
KEY WEST FL 33040 317 KEY WEST FL 33040		317 KEY WEST EL 33040		DO NOT WRITE IN THIS	SPACE
US			3. Date Incorporated or Qualifed		
				02/08/1988	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0037377	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional Fee Required
City & Stat	<u></u>	City & State		C Floring Company Financing	
23	ن او در العبد التي يا الله العبدين يا و يا الله الله الله الله الله الله الله ا	28	بمعيدي معاريها عادرها ال	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be ** ** Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year In	
24	25	29 30		Personal Property Tax.	☐ Yes [X No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered	Agent
EAD	ELLY CRECORY G		81 Name	gory G. Farrelly	
FARELLY, GREGORY G. 517 WHITEHEAD STREET				gory G. Farrelly iss (P.O. Box Number is Not Acceptable)	
KEY WEST FL 33040			83 C/O	<u> Catalfomo & Farrelly</u>	/
RET WEST IE 33040			506	Louisa Street	
			84 City	FI	85 Zip Code
11. Pursuant to the orbisions of Sections 607 0502 and 607 1508 filorida Statutes, the above-named c				West	= 33040 f changing its registered
11. Pursuant to the provisions of Sections 607 0502 and 607.1508 filorida 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 Fonda. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent Lam farilliar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
agerpa	A Canada accept the contract	1 44 I	o calules.		120/09.
SIGNATURE	Signature, tiped or project name of registered age in		gistered Agent signature required		2 11 1
12.	OPFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12 ☐ Change ☐ Addition
TITLE	D CARDINA MACENTA	C DELETE	1.1 TITLE		Ci Criange Ci Accinon
NAME	SCARDINA, VINCENT A. 2123 FLAGLER AVE.		1.2 NAME		
STREET ADDRESS	KEY WEST FL		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	P	☐ DELETE	2.1 TITLE		Change Addition
NAME	THOMPSON, RICK EDWARD	,	2.2 NAME		
STREET ADDRESS	1703 SOUTH ST		2.3 STREET ADDRESS		
ÇITY-ST-ZIP	KEY WEST FL		2. 4 CITY-ST-ZIP		
TITLE	the second secon	DELETE	3.1-TITLE 1		- Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		ranciere	3.4. C/TY-ST-Z/P		☐ Change ☐ Addition
TITLE	• •	[] DELETÉ	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP	 	. DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS	•		5.3 STREET ADDRESS		
CITY-ST-ZIP	·		5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 ΠTLE		☐ Change ☐ Addition
NAMÉ			6.2 NAME		
STREET ADDRESS	·		6.3 STREET ADDRESS		
CITY+\$T-ZIP	1		6.4 CITY-ST-ZIP		ì

14. I 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #