2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001200

PO BOX 227337

MIAMI, FL 33122

Address:

City-St-Zip:

FILED Apr 18, 2007 Secretary of State

Entity Name: ROOFING CONTRACTORS ASSOCIATION OF SOUTH FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business: P.O. BOX 291416 16867 SW 1ST PLACE DAVIE, FL 333291416 PEMBROKE PINES, FL 33027 **Current Mailing Address: New Mailing Address:** P.O. BOX 291416 DAVIE, FL 333291416 FEI Number: 01-0608944 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MCLAUGHLIN, GREGORY A ESQ. C/O TRIPP SCOTT, P.A. 110 S.E. 6TH STREET, 15TH FLOOR FORT LAUDERDALE, FL 33301 US 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete BARON, JOHN AROSTEGUI, GONZALO Name: Name: 2270 WEST 78TH STREET Address: 559 WEST MOWRY STREET Address: City-St-Zip: HIALEAH, FL 33016 City-St-Zip: HOMESTEAD, FL 33030 Title: Title: **EVP** (X) Change () Addition () Delete FLETT, JIM Name: STOKES, DANIEL Name: Address: 2020 THOMAS ST Address: 1950 NW 22 STREET City-St-Zip: HOLLYWOOD, FL 33020 City-St-Zip: FT. LAUDERDALE, FL 33311 Title: Title: (X) Change () Addition () Delete CONE, BILL TONY, WHITTAKER Name: Name: 201 NW 12TH AVE Address: Address: 3500 NW 10TH AVE City-St-Zip: HOLLYWOOD, FL 33019 City-St-Zip: OAKLAND PARK, FL 33309 Title: () Delete Title: () Change () Addition Name: FOOTE, ROB Name: Address: 1314 E. ATLANTIC BLVD. Address: City-St-Zip: POMPANO BEACH, FL 33060 City-St-Zip: Title: () Delete Title: PΠ (X) Change () Addition RODMAN, KAREN RODMAN, KAREN Name: Name:

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 or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: ANGIE GOLDBERER ED 04/18/2007

12151 SW 128TH CT; UNIT #108

MIAMI, FL 33186