

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000005659

FILED  
May 25, 2011  
Secretary of State

**Entity Name:** TRI-COUNTY ROOFING CONTRACTORS ASSOCIATION, INC.

**Current Principal Place of Business:**

5650 STATE ROAD 557  
LAKE ALFRED, FL 33850

**New Principal Place of Business:**

**Current Mailing Address:**

P.O.BOX 1692  
EATON PARK, FL 33840

**New Mailing Address:**

**FEI Number:** 26-0294282

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WATERSON, DARILYN  
5650 STATE ROAD 557  
LAKE ALFRED, FL 33850 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: HARP, DONNIE  
Address: 5596 COMMERCIAL BLVD NW  
City-St-Zip: WINTER HAVEN, FL 33880

Title: V  
Name: LEBEOUF, GENE JR  
Address: 1920 US HWY 301 N  
City-St-Zip: TAMPA, FL 33619

Title: S  
Name: HUTTON, STEPHI  
Address: 2820 THORNHILL RD  
City-St-Zip: WINTER HAVEN, FL 33880

Title: T  
Name: WATERSON, DARILYN  
Address: 5650 STATE ROAD 557  
City-St-Zip: LAKE ALFRED, FL 33850

I hereby 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 all other like empowered.

SIGNATURE: DARILYN WATERSON

PRES

05/25/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date