FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED
95 APR 19 AM 8:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N93000003815 (8)

1. Corporation Name
PINELLAS COUNTY ROOFING CONTRACTORS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
P.O. BOX 10427 ST. PETERSBURG FL 33733	P.O. BOX 10427 ST. PETERSBURG FL 33733

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/19/1993
3a. Date of Last Report: 05/01/1994
4. FEI Number: 59-3195251 ☐ 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

OUELLETTE, ERNEST J.
4736 HAINES RD. N.
#1109
ST. PETERSBURG FL 33714

10. Name and Address of New Registered Agent

81 Name: OUELLETTE, ERNEST J.
82 Street Address (P.O. Box Number is Not Acceptable): 4736 HAINES RD. N.
83
84 City: ST. PETERSBURG FL 85 Zip Code: 33714

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: ERNEST J. OUELLETTE V.PRES. — DATE: 4-12-95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	1.1 TITLE	P	☒ Change ☐ Addition
NAME	OUELLETTE, ERNEST J	1.2 NAME	IANELLA, JEFF	
STREET ADDRESS	4736 HAINES RD N	1.3 STREET ADDRESS	132 10 AVE. N	
CITY-ST-ZIP	ST PETERSBURG FL	1.4 CITY-ST-ZIP	SAFETY HARBOR, FL	
TITLE	V	2.1 TITLE	V	☒ Change ☐ Addition
NAME	IANELLA, JEFF	2.2 NAME	OUELLETTE, ERNEST J.	
STREET ADDRESS	132 10 AVE N	2.3 STREET ADDRESS	4736 HAINES Rd. N	
CITY-ST-ZIP	SAFETY HARBOR FL	2.4 CITY-ST-ZIP	ST PETERSBURG, FL	
TITLE	S	3.1 TITLE	S	☒ Change ☐ Addition
NAME	MAY, ROY	3.2 NAME	SHARON SPICER	
STREET ADDRESS	13500 RODGERS AVE #1109	3.3 STREET ADDRESS	13521 BELLEWOOD AVE.N.	
CITY-ST-ZIP	LARGO FL	3.4 CITY-ST-ZIP	SEMINOLE, FL. 34646	
TITLE	T	4.1 TITLE	T	☐ Change ☐ Addition
NAME	HIGHTOWER, ROBERT	4.2 NAME	HIGHTOWER, ROBERT	
STREET ADDRESS	2917 26 ST N	4.3 STREET ADDRESS	2917 26 ST. N.	
CITY-ST-ZIP	ST PETERSBURG FL	4.4 CITY-ST-ZIP	ST. PETERSBURG, FL	
TITLE	D	5.1 TITLE	D	☐ Change ☐ Addition
NAME	SPICER, GARY	5.2 NAME	SPICER, GARY	
STREET ADDRESS	13521 BELLEWOOD AVE N	5.3 STREET ADDRESS	13521 BELLEWOOD AVE N.	
CITY-ST-ZIP	SEMINOLE FL	5.4 CITY-ST-ZIP	SEMINOLE, FL	
TITLE	D	6.1 TITLE	D	☐ Change ☐ Addition
NAME	REVELS, TIM	6.2 NAME	REVELS, TIM	
STREET ADDRESS	6251 PARK BLVD N #8	6.3 STREET ADDRESS	6251 PARK BLVD N #8	
CITY-ST-ZIP	PINELLAS PARK FL	6.4 CITY-ST-ZIP	Pinellas Park FL	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: ERNEST J. OUELLETTE — 4/12-95 — 813-525-1502
SIGNATURE AND TYPED OR PRINTED NAME OF MAKING OFFICER OR DIRECTOR — Date — Daytime Phone #

COUNTY