

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N93000003815 (8)

1. Corporation Name

PINELLAS COUNTY ROOFING CONTRACTORS ASSOCIATION,
INC.

Principal Place of Business

P.O. BOX 10427
ST. PETERSBURG FL 33733

Mailing Address

P.O. BOX 10427
ST. PETERSBURG FL 33733



900001875969

-06/26/96--01047--024

***61.25

3. Date Incorporated or Qualified
08/19/1993

3a. Date of Last Report
04/19/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

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

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

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

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

Zip Code
33714

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title in applicable

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '92

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
P
IANELLA, JEFF
132 10 AVENUE N.
SAFETY HARBOR FL

DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP
P
IANELLA, JEFF
132-10th AVE. N.
SAFETY HARBOR, FL.

Change Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
V
OUELLETTE, ERNEST J.
4736 HAINES ROAD NO.
ST. PETERSBURG FL

DELETE

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP
V
OUELLETTE, ERNEST J.
4736 HAINES ROAD N.
ST. PETERSBURG, FL.

Change Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
S
SPICER, SHARON
13521 BELLEWOOD AVE. N.
SEMINOLE FL

DELETE

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP
S
SPICER, SHARON
13521 BELLEWOOD AVE. N.
SEMINOLE, FL.

Change Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
T
HIGHTOWER, ROBERT
2917 26 ST. N.
ST PETERSBURG FL

DELETE

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP
T
HIGHTOWER, ROBERT
2917-26th ST. N.
ST. PETERSBURG, FL.

Change Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
SPICER, GARY
13521 BELLEWOOD AVE N
SEMINOLE FL

DELETE

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP
D
SPICER, GARY
13521 BELLEWOOD AVE. N.
SEMINOLE, FL.

Change Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
REVELS, TIM
6251 PARK BLVD N #8
PINELLAS PARK FL

DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP
D
REVELS, TIM
6251 PARK BLVD. N. #8
PINELLAS PARK, FL.

Change Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JEFFERY P. IANELLA

PRESIDENT

2/16/96

813 786 8776

CR2E037 (12/95)