

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000076974

Entity Name: M.D. ROOFING, INC.

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

2750 NE 56 ST  
OCALA, FL 34479

**New Principal Place of Business:**

**Current Mailing Address:**

2750 NE 56 ST  
OCALA, FL 34479

**New Mailing Address:**

FEI Number: 65-1032411

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ALLEN, DEBORAH R  
2750 NE 56 ST  
OCALA, FL 34479 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: ALLEN, DEBORAH R  
Address: 2750 NE 56 ST  
City-St-Zip: Ocala, FL 34479

Title: V  
Name: ALLEN, HUBERT M  
Address: 2750 NE 56 ST  
City-St-Zip: Ocala, FL 34479

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DEBORAH R. ALLEN

PRES

04/29/2011

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

\_\_\_\_\_  
Date