

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 20, 2007 8:00 am**  
**Secretary of State**

02-20-2007 90050 049 \*\*\*150.00

**DOCUMENT # P00000096008**

1. Entity Name  
**P & A ROOFING AND SHEET METAL, INC.**



Principal Place of Business

**4495 35TH STREET  
ORLANDO, FL 32811**

Mailing Address

**4495 35TH STREET  
ORLANDO, FL 32811**

**40021425**



02152007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**65-1078685**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

**MANZELLA, JOHN P  
9050 PINNACLE CIRCLE  
WINDERMERE, FL 34786**

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_

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

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE	PD
NAME	DEVARONA, ROBERT
STREET ADDRESS	372 W. GRANT STREET
CITY-ST-ZIP	ORLANDO, FL 32806
TITLE	VD
NAME	MANZELLA, JOHN
STREET ADDRESS	372 W. GRANT STREET
CITY-ST-ZIP	ORLANDO, FL 32806
TITLE	VD2
NAME	PRITTS, DANA
STREET ADDRESS	2000 NW 22ND STREET
CITY-ST-ZIP	FORT LAUDERDALE, FL
TITLE	VD3
NAME	EARL, WILLIAM
STREET ADDRESS	2000 NW 22ND STREET
CITY-ST-ZIP	FORT LAUDERDALE, FL
TITLE	STD
NAME	FERNANDEZ, JOSE
STREET ADDRESS	11905 NW 99TH AVENUE
CITY-ST-ZIP	HIALEAH GARDENS, FL 33018
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**2/15/07**

Date

**407650-9541**

Daytime Phone #