2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000088157

Entity Name: IGC ROOFING, INC.

FILED Apr 11, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

417 MAGNOLIA STREET 141 CONCORD DRIVE

ALTAMONTE SPRINGS, FL 32701 SUITE 1205

CASSELBERRY, FL 32707

Current Mailing Address: New Mailing Address:

417 MAGNOLIA STREET 141 CONCORD DRIVE

ALTAMONTE SPRINGS, FL 32701 SUITE 1205

CASSELBERRY, FL 32707

FEI Number: 59-3740964 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

GARVIN, ISAAC GARVIN, ISAAC M
417 MAGNOLIA STREET 141 CONCORD DRIVE

ALTAMONTE SPRINGS, FL 32701 US SUITE 1205

CASSELBERRY, FL 32707 US

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: ISAAC M. GARVIN 04/11/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Name: GARVIN, ISAAC Name: GARVIN, ISAAC M
Address: 417 MAGNOLIA STREET Address: 141 CONCORD DRIVE, SUITE 1205

Address: 417 MAGNOLIA STREET Address: 141 CONCORD DRIVE, SUITE 120: City-St-Zip: ALTAMONTE SPRINGS, FL 32701 City-St-Zip: CASSELBERRY, FL 32707

Title: VP () Delete Title: VP (X) Change () Addition

Name: GARVIN, GERALD D Name: GARVIN, GERALD D

Address: 417 MAGNOLIA STREET Address: 141 CONCORD DRIVE, SUITE 1205 City-St-Zip: ORLANDO, FL 32701 City-St-Zip: CASSELBERRY, FL 32707

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: ISAAC M. GARVIN P 04/11/2008