2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000115701

Entity Name: RECOMMENDED ROOFING, INC.

FILED Apr 30, 2005 Secretary of State

Certificate of Status Desired (X)

Current Principal Place of Business:	New Principal Place of Business:
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RECOMMENDED ROOFING INC. 5008 GRAND BLVD

5008 GRAND BLVD. NEW PORT RICHEY, FL 34652 US NEW PORT RICHEY, FL 34652

Current Mailing Address: New Mailing Address:

RECOMMENDED ROOFING INC. 5408 ST JAMES DRIVE

5008 GRAND BLVD. NEW PORT RICHEY, FL 34652 US

NEW PORT RICHEY, FL 34652

FEI Number Not Applicable ()

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

NEPTUNE, CARY D

DREW, KELLY L

FEI Number Applied For ()

4335 SHORELINE DR. 5408 ST JAMES DRIVE

NEW PORT RICHEY, FL 34652 US NEW PORT RICHEY, FL 34652 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: KELLY L DREW 04/30/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

FEI Number: 59-3760653

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: EXVP () Delete Title: P (X) Change () Addition

 Name:
 HAY, FREDERICK T JR
 Name:
 NEPTURN, CARY D

 Address:
 2850 N.W. 44TH ST.
 Address:
 4385 SHORELINE DRIVE

City-St-Zip: OAKLAND PARK, FL 33309 City-St-Zip: NEW PORT RICHEY, FL 34652 US

Title: DPST () Delete Title: S (X) Change () Addition

Name: NEPTUNE, CARY D Name: NEPTUNE, CARY D
Address: 4385 SHORELINE DR. Address: 4385 SHORELINE DRIVE

City-St-Zip: NEW PORT RICHEY, FL 34652 City-St-Zip: NEW PORT RICHEY, FL 34652 US

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

Name: Name: NEPTUNE, CARY D
Address: Address: 4385 SHORELINE DRIVE

City-St-Zip: City-St-Zip: NEW PORT RICHEY, FL 34652 US

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

 Name:
 Name:
 NEPTUNE, CARY D

 Address:
 Address:
 4385 SHORELINE DRIVE

City-St-Zip: NEW PORT RICHEY, FL 34652 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CARY NEPTUNE P 04/30/2005