

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 91436 023 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P01000115701

1. Entity Name
RECOMMENDED ROOFING, INC.



Principal Place of Business
7705 HIGHWATER DR
L-3
NEW PORT RICHEY, FL 34655

Mailing Address
7705 HIGHWATER DR
L-3
NEW PORT RICHEY, FL 34655

2. Principal Place of Business

RECOMMENDED ROOFING INC.
Suite, Apt. #, etc.

5008 GRAND BLVD.

City & State
NEW PORT RICHEY FL.

Zip Country
34652 USA

3. Mailing Address

RECOMMENDED ROOFING INC.
Suite, Apt. #, etc.

5008 GRAND BLVD.

City & State
NEW PORT RICHEY

Zip Country
34652 USA



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number

59-3760653

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

NEPTUNE, CARY D
7705 HIGHWATER DR L-3
NEW PORT RICHEY, FL 34655

7. Name and Address of New Registered Agent

Name
NEPTUNE, CARY D.

Street Address (P.O. Box Number is Not Acceptable)

4335 SHORELINE DR.

City Zip Code
NEW PORT RICHEY FL 34652

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

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

CARY D. NEPTUNE

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

DATE

4-25-03

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DPST
NEPTUNE, CARY D
5210 SOUTH SHORELINE DR
FLORAL CITY, FL 34436 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
RUPP, TODD C
4715 LIGHTERWOOD WAY
VALRICO, FL 33594 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
EXECUTIVE VICE PRESIDENT
FREDERICK THOMAS HAY JR
2850 N.W. 44TH ST.
OAKLAND PARK, FL 33309 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DPST
CARY D. NEPTUNE
4335 SHORELINE DR.
NEW PORT RICHEY, FL 34652 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 another like empowered.

SIGNATURE:

Cary D. Neptune
SIGNATURE (AND TYPED OR PRINTED NAME) OF SIGNING OFFICER OR DIRECTOR

CARY D. NEPTUNE 4-25-03

One

352-220-1900

Daytime Phone #

CR2E034 (10/02)