2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000006224

Entity Name: ROBERT BINNS ROOFING, INC.

FILED Mar 24, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3010 HELMS DR. AUBURNDALE, FL 33823 **Current Mailing Address: New Mailing Address:** 3010 HELMS DR. AUBURNDALE, FL 33823 FEI Number: 43-1951384 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BINNS, MELISSA A 3010 HELMS DR AUBURNDALE, FL 33823 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 Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition BINNS, ROBERT W BINNS, ROBERT W PRES Name: Name: 3010 HELMS DR. 3010 HELMS DR. Address: Address: City-St-Zip: AUBURNDALE, FL 33823 City-St-Zip: AUBURNDALE, FL 33823 () Delete Title: () Change (X) Addition Title: Name: Name: BINNS, MELISSA A SEC 3010 HELMS DR. Address: Address: AUBURNDALE, FL 33823 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change (X) Addition BINNS, ROBERT W PRES Name: Name: 3010 HELMS DR. Address Address: City-St-Zip: City-St-Zip: AUBURNDALE, FL 3383 Title: () Delete Title: () Change (X) Addition BINNS, ROBERT W Name: Name: Address: Address: 3010 HELMS DR. City-St-Zip: City-St-Zip: AUBURNDALE, FL 33823 Title: Title: () Change (X) Addition () Delete BINNS, MELISSA A Name: Name: Address: 3010 HELMS DR. Address: AUBURNDALE, FL 33823 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change (X) Addition BINNS, MELISSA A TRESURE Name: Name: Address: Address: 3010 HELMS DR. City-St-Zip: City-St-Zip: AUBURNDALE, FL 33823

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: MELISSA BINNS SEC 03/24/2003