

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

FILED

03 DEC 26 AM 10:41

DOCUMENT # *P02000061872*



1. Entry Name:
Bonded Roofers of Pinellas, Inc
4800 Oaklawn Lane
St Petersburg FL 33708

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

REINSTATEMENT 03

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
4800 Oaklawn Lane
Suite, Apt. #, etc.

3. Mailing Address
10901 Mohawk Road
Suite, Apt. #, etc.

City & State:
St Petersburg FL
Zip
33708

City & State:
Madeira Beach FL
Zip
33708

4. FBI Number
01-0721284

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name *Howard Jenkins*
Street Address (P.O. Box Number is Not Acceptable)

4800 Oaklawn Lane
City *St Petersburg* FL Zip Code *33708*

8. The above named party supports 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 *Graham Parsons* 12/23/03
(NOTE: Registered Agent signature required when reinstating)

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$81.25

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
D Howard Jenkins
4800 Oaklawn Lane
St Petersburg FL 33708

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D Graham Parsons
10901 Mohawk Road
St Petersburg, FL 33708

TITLE
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800025771148
12/23/03 01035 004 \$150.00

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Madeira Beach, FL 33708-3111

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 on an attachment with an address, with an office like appearance.

SIGNATURE: *Graham Parsons* 12/23/03 727-687-9819
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E0348 (12/02)

December 22, 2003

To Whom It May Concern:

We have just received a Uniform Business Report Letter of Dissolution of our corporation. We have received no other notice regarding our UBR report. My partner has been hospitalized for most of this year and I have been attempting to keep up on all the affairs of the business. Since my partners address is the address of record, I never received the reports and had no way of knowing this dissolution had occurred.

As per instructions received when we called the Division of Corporations, we are enclosing our \$150 check for the year 2003.

We appreciate your consideration in this matter.

Thank you.

A handwritten signature in black ink, appearing to read 'Graham Parsons', written over a horizontal line.

Graham Parsons