

FILED
Feb 07, 2003 8:00 am
Secretary of State

02-07-2003 90112 011 ***158.75

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

DOCUMENT # P02000063968 1. Entity Name ALL AMERICAN ROOFING ENTERPRISES, INC.																																																																																																																																																					
Principal Place of Business 11820 SEMINOLE DRIVE PORT RICHEY, FL 34668		Mailing Address 11820 SEMINOLE DRIVE PORT RICHEY, FL 34668																																																																																																																																																			
2. Principal Place of Business 11820 Seminole Dr.		3. Mailing Address Same																																																																																																																																																			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 																																																																																																																																																			
City & State New Port Richey, FL		City & State 		4. Filing Number 01-0712878																																																																																																																																																	
Zip 34654		Country USA		5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required																																																																																																																																																	
6. Name and Address of Current Registered Agent KONING, DARRYL E 11820 SEMINOLE DRIVE PORT RICHEY, FL 34668				7. Name and Address of New Registered Agent Name Darryl E. Koning Street Address (P.O. Box Number is not acceptable) 11820 Seminole Dr. City New Port Richey FL 34654																																																																																																																																																	
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 Same - Corrected address																																																																																																																																																					
9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees																																																																																																																																																					
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="3" style="text-align: left;">10. OFFICERS AND DIRECTORS</th> <th colspan="3" style="text-align: left;">11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</th> </tr> </thead> <tbody> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 55%;">NAME</td> <td style="width: 30%; text-align: center;">☐ Delete</td> <td style="width: 15%;">TITLE</td> <td style="width: 55%;">NAME</td> <td style="width: 30%; text-align: center;">☒ Change ☐ Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td>KONING, DARRYL E</td> <td></td> <td>STREET ADDRESS</td> <td>New Port Richey, FL 34654</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>11820 SEMINOLE DRIVE PORT RICHEY, FL 34668</td> <td></td> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td>V</td> <td style="text-align: center;">☒ Delete</td> <td>TITLE</td> <td></td> <td style="text-align: center;">☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td>MCKNIGHT, DOUG S</td> <td></td> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>9718 JEROME DRIVE</td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>NEW PORT RICHEY, FL 34652</td> <td></td> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td>S</td> <td style="text-align: center;">☒ Delete</td> <td>TITLE</td> <td></td> <td style="text-align: center;">☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td>PUGH, JERRY D</td> <td></td> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>14708 FAIROAK WAY</td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>HUDSON, FL 34657</td> <td></td> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td>T</td> <td style="text-align: center;">☒ Delete</td> <td>TITLE</td> <td></td> <td style="text-align: center;">☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td>RILEY, ADAM W</td> <td></td> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>LOT 41 US 19 1447</td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>HUDSON, FL 34657</td> <td></td> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: center;">☐ Delete</td> <td>TITLE</td> <td></td> <td style="text-align: center;">☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: center;">☐ Delete</td> <td>TITLE</td> <td></td> <td style="text-align: center;">☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </tbody> </table>						10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			TITLE	NAME	☐ Delete	TITLE	NAME	☒ Change ☐ Addition	STREET ADDRESS	KONING, DARRYL E		STREET ADDRESS	New Port Richey, FL 34654		CITY-ST-ZIP	11820 SEMINOLE DRIVE PORT RICHEY, FL 34668		CITY-ST-ZIP			TITLE	V	☒ Delete	TITLE		☐ Change ☐ Addition	NAME	MCKNIGHT, DOUG S		NAME			STREET ADDRESS	9718 JEROME DRIVE		STREET ADDRESS			CITY-ST-ZIP	NEW PORT RICHEY, FL 34652		CITY-ST-ZIP			TITLE	S	☒ Delete	TITLE		☐ Change ☐ Addition	NAME	PUGH, JERRY D		NAME			STREET ADDRESS	14708 FAIROAK WAY		STREET ADDRESS			CITY-ST-ZIP	HUDSON, FL 34657		CITY-ST-ZIP			TITLE	T	☒ Delete	TITLE		☐ Change ☐ Addition	NAME	RILEY, ADAM W		NAME			STREET ADDRESS	LOT 41 US 19 1447		STREET ADDRESS			CITY-ST-ZIP	HUDSON, FL 34657		CITY-ST-ZIP			TITLE		☐ Delete	TITLE		☐ Change ☐ Addition	NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY-ST-ZIP			CITY-ST-ZIP			TITLE		☐ Delete	TITLE		☐ Change ☐ Addition	NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY-ST-ZIP			CITY-ST-ZIP		
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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 all other like empowered.																																																																																																																																																					
SIGNATURE: Darryl E. Koning 2-3-03 727 243836																																																																																																																																																					

90020540



☐ CHECK HERE IF MAKING CHANGES

CH25034 (10/02)