## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 08, 2005 08:00 AM Secretary of State

Daytime Phone #

DOCL	JMENT	#	P0200	<u> </u>	75321
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1. Entity Name

PIKE'S PEAK ROOFING & CONSTRUCTION, INC.



Principal Place of Business

7401 BAY ISLAND DRIVE JAMAICA BUILDING 337 SOUTH PASADENA, FL 33707 Mailing Address

7401 BAY ISLAND DRIVE IAMAICA BUILDING 337 SOUTH PASADENA, FL 33707



DO NOT WOITE IN THE COACE	04022005 No Chg-P	CR2E034 (10/03)
DO NOT WRITE IN THIS SPACE	4. FE! Number 86-1050938	Applied For Not Applicable
	5. Certificate of Status Desired	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PIKE, RICKY S 7401 BAY ISLAND DRIVE JAMAICA BUILDING 337 SOUTH PASADENA, FL 33707

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

the obligat	named entity submits this statement for the plions of registered agent.	ourpose of changing its registere	ed office or n	egistered agent, or bo	oth, in the State of Florida. I an	n familiar with, and accept	
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE							
FILE NOWI!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00  9. Election Campaign Finance Trust Fund Contribution.				\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	TORS	I		··		
1):TLE NAME STREET ADDRESS CITY-ST-ZIP	PSD PIKE, RICKY S 7401 BAY ISLAND DRIVE, JAMAICA I SOUTH PASADENA, FL 33707	BLDG, 337			U0000029401;	?	
TITLE NAME STREET ADDRESS CITY+ST-ZIP	T PIKE, MISSY 7401 BAY ISLAND DRIVE, JAMAICA I SOUTH PASADENA, FL 33707	BLDG. 337			04/08/05-80052-	-003 150.00	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			1				
12. I hereby certify that the information supplied with this filling 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.							

INTED NAME OF SIGNING OFFICER OR DIRECTOR