2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000084868

Entity Name: ROCKY'S ROOFING CO., INC.

FILED Jul 28, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5640 SW 188 AVE

SWRANCHES, FL 33332

Current Mailing Address: New Mailing Address:

5640 SW 188 AVE 5640 SW 188 AVE

FT LAUDERDALE, FL 33332 S W RANCHES, FL 33332

FEI Number: 02-2638575 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MELANIE K. DAVIS
340 N.W. 134 AVENUE
SHANNON L. DAVIS
5640 SW 186 AVE

PLANTATION, FL 33325 US SW RANCHES, FL 33332 US

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: MELANIE K DAVIS 07/28/2009

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD () Delete Title: PTD (X) Change () Addition

 Name:
 DAVIS, LESTER A
 Name:
 DAVIS, SHANNON L

 Address:
 5640 SW 188 AVE
 Address:
 5640 SW 188 AVE

City-St-Zip: FT LAUDERDALE, FL 33332 City-St-Zip: FT LAUDERDALE, FL 33332

Title: VSD () Delete Title: SEC (X) Change () Addition

 Name:
 DAVIS, MELANIE K
 Name:
 DAVIS, MELANIE K

 Address:
 5640 SW 188 AVE
 Address:
 5640 SW 188 AVE

City-St-Zip: FT LAUDERDALE, FL 33332 City-St-Zip: FT LAUDERDALE, FL 33332

Title: D (X) Delete Title: () Change () Addition

 Name:
 DAVIS, SHANNON L
 Name:

 Address:
 5640 S W 188 AVENUE
 Address:

 City-St-Zip:
 S W RANCHES, FL 33332
 City-St-Zip:

Title: D (X) Delete Title: () Change () Addition

 Name:
 BENNETT, RICHARD
 Name:

 Address:
 6321 PEMBROKE ROAD
 Address:

 City-St-Zip:
 HOLLYWOOD, FL 33023
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: SHANNON L. DAVIS PRES 07/28/2009