

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000084868

FILED
Jul 28, 2009
Secretary of State

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

Current Principal Place of Business:

5640 SW 188 AVE
S W RANCHES, FL 33332

New Principal Place of Business:

Current Mailing Address:

5640 SW 188 AVE
FT LAUDERDALE, FL 33332

New Mailing Address:

5640 SW 188 AVE
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:

MELANIE K. DAVIS
340 N.W. 134 AVENUE
PLANTATION, FL 33325 US

Name and Address of New Registered Agent:

SHANNON L. DAVIS
5640 SW 186 AVE
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:

Title: PTD () Delete
Name: DAVIS, LESTER A
Address: 5640 SW 188 AVE
City-St-Zip: FT LAUDERDALE, FL 33332

Title: VSD () Delete
Name: DAVIS, MELANIE K
Address: 5640 SW 188 AVE
City-St-Zip: FT LAUDERDALE, FL 33332

Title: D (X) Delete
Name: DAVIS, SHANNON L
Address: 5640 S W 188 AVENUE
City-St-Zip: S W RANCHES, FL 33332

Title: D (X) Delete
Name: BENNETT, RICHARD
Address: 6321 PEMBROKE ROAD
City-St-Zip: HOLLYWOOD, FL 33023

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: DAVIS, SHANNON L
Address: 5640 SW 188 AVE
City-St-Zip: FT LAUDERDALE, FL 33332

Title: SEC (X) Change () Addition
Name: DAVIS, MELANIE K
Address: 5640 SW 188 AVE
City-St-Zip: FT LAUDERDALE, FL 33332

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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

Electronic Signature of Signing Officer or Director

Date