

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 18, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # P03000030737**

1. Entity Name

WAYNE ROGERS FRAMING, INC.



Principal Place of Business

2080W ST RD 46  
GENEVA, FL 32732 US

Mailing Address

2080W ST RD 46  
GENEVA, FL 32732 US



04032007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number	Applied For
81-0600531	Not Applicable

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

6. Name and Address of Current Registered Agent

ROGERS, ALFORD W  
2080 STATE ROAD 46  
GENEVA, FL 32732

**DO NOT WRITE  
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE	P
NAME	ROGERS, ALFORD W
STREET ADDRESS	2080 STATE ROAD 46
CITY- ST- ZIP	GENEVA, FL 32732
TITLE	VP
NAME	CORWIN, KEITH
STREET ADDRESS	2710 VICTORY PALM DR.
CITY- ST- ZIP	EDGEWATER, FL 32141
TITLE	TR
NAME	RICHTER, MATTHEW
STREET ADDRESS	2603 ALAMOAS PL.
CITY- ST- ZIP	LAKE MARY, FL 32746
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

U000000715255  
04/27/07-80056-012 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:**

*Alford W. Rogers* Alford W. Rogers

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-13-07 407-832-9494

Date

Daytime Phone #