

FILED
Mar 07, 2005 8:00 am
Secretary of State

03-07-2005 90261 036 ***150.00

2005 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P03000149999			
1. Entity Name AMERICAN ROOFING CENTRAL INC.			
Principal Place of Business 5223 PONCE DE LEON BLVD SEBRING, FL 33872 US		Mailing Address 5223 PONCE DE LEON BLVD SEBRING, FL 33872 US	
2. Principal Place of Business 5805 Wolf Lake Rd.		3. Mailing Address 5805 Wolf Lake Rd.	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Sebring, FL		City & State Sebring, FL	
Zip 33875-8058		Country US	
Zip 33875-8058		Country US	
4. FEI Number 20-0446550		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent RENTZ, GERNRILYNEE M 2011 MULLIGAN RD. SEBRING, FL 33872		7. Name and Address of New Registered Agent Name Gerrilynne M. Rentz Street Address (P.O. Box Number is Not Acceptable) 5805 Wolf Lake Rd. City Sebring FL Zip Code 33875	
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: <i>Gerrilynne Marie Rentz</i> (NOTE: Registered Agent signature required when reinstating) DATE: <i>March 2, 2005</i>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HALBERT, GARY R 5223 PONCE DE LEON BLVD SEBRING, FL 33872 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP RENTZ, RICHARD J 2011 MULLIGAN RD. SEBRING, FL 33872 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Rentz, Richard J. 5805 Wolf Lake Rd. Sebring, FL 33875-8058 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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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: <i>Richard J. Rentz</i> V.P.		3/2/05 (863) 381-1453	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	