2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 04, 2005 8:00 am Secretary of State

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1. Entity Name HUFFNAGLE ROOFING, INC.						03-07-20	05 90277 045	***1	50.00
Principal Place of Business Mailing Address 5600 LIDO ST. 5600 LIDO ST. ORLANDO, FL 32807 ORLANDO, FL 32807					~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~				
Principal Place of Business 3. Mailing Address			 -						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			02212005	02212005 Chg-P CR2E034 (10/03)			
City & State		City & State			4. FEI Numbe	361951	7	_	olied For Applicable
Zip	Country	Zip	Cour	ntry		of Status Desired	□ \$8.75 Fee Re	quired	
	6. Name and Address of Current	Registered Agent	Name	7. Name and	Address of New	Registered Agent			
HUFFNAGLE, CHRISTIAN T 5600 LIDO ST.				Street Address (P.O. Box Number is Not Acceptable)					
ORLANDO, FL 32807									
				City	FL Zip Code				
9 The show	:	<u> </u>	FE '						
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									
Signature, typegrar primate harps of registered agent and title if applicable. (NOTE: Registered Agent algorithms required when reinstating) CATE									
FILE NOWIII FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees									
10.	OFFICERS AND	DIRECTORS	11.		ADDITIONS/	CHANGES TO OF	FICERS AND DIREC	TORS	IN 11
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CITY-ST-ZIP	ORLANDO, FL 32807	Пе		/-ST-ZIP					Addition
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CITY-ST-ZP	i		CIT	r-51-ZP					

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.

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