


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2005 8:00 am
Secretary of State

04-28-2005 90217 030 ***150.00

DOCUMENT # P04000103850	
1. Entity Name GEORGE KOENKE ROOFING, CO.	

Principal Place of Business 1100 S FEDERAL HWY BOYNTON BEACH, FL 33435	Mailing Address 1100 S FEDERAL HWY BOYNTON BEACH, FL 33435
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14006471

2. Principal Place of Business 9410 Listow Terrace Suite, Apt. #, etc.	3. Mailing Address 9410 Listow Terrace Suite, Apt. #, etc.
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04252005 Chg-P CR2E034 (10/03)

City & State Boynton Beach, FL	City & State Boynton Beach, FL	4. FEI Number 651229402	Applied For <input type="checkbox"/> Not Applicable
Zip 33437	Country Palm Beach	Zip 33437	Country Palm Beach
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			

6. Name and Address of Current Registered Agent KOENKE, GEORGE 1100 S FEDERAL HWY BOYNTON BEACH, FL 33435		7. Name and Address of New Registered Agent Name Koenske, George Street Address (P.O. Box Number is Not Acceptable) 9410 Listow Terrace City Boynton Beach FL Zip Code 33437	
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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 *George Koenske* office Director 4/25/05
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, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D KOENKE, GEORGE 1100 S FEDERAL HWY BOYNTON BEACH, FL 33435 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: *George Koenske* George Koenske 4/25/05 (954) 249-2121
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #