2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000124609

Entity Name: MAXWELL URETHANE ROOFING, INC.

FILED Jan 18, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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1242 MC NEILL ROAD 2729 EDISON AVENUE N FT MYERS, FL 33903 FT. MYERS, FL 33916

Current Mailing Address: New Mailing Address:

1242 MCNEILL ROAD P.O. BOX 3740

N FT MYERS, FL 33903 N FT MYERS, FL 33918

FEI Number: 20-2175577 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MAXWELL, DANIEL
1242 MCNEILL ROAD
N FT MYERS, FL 33903 US

MAXWELL, DANIEL
2729 EDISON AVENUE
FT. MYERS, FL 33916 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: DANIEL MAXWELL 01/18/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT () Delete Title: PT (X) Change () Addition

 Name:
 MAXWELL, DANIEL
 Name:
 MAXWELL, DANIEL

 Address:
 922 DIPLEM ST
 Address:
 922 DIPLIMOT ST

 City-St-Zip:
 CAPE CORAL, FL 33909
 City-St-Zip:
 CAPE CORAL, FL 33909

Title: V () Delete Title: () Change () Addition

 Name:
 MAXWELL, JESSE
 Name:

 Address:
 6331 NALLE GRADE RD
 Address:

 City-St-Zip:
 N FT MYERS, FL 33917
 City-St-Zip:

Title: S () Delete Title: () Change () Addition

Name: LEONARD, JEFF	Name:
Address: 2723 SW 8 CT	Address:
City-St-Zip: CAPE CORAL, FL 33914	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: DANIEL MAXWELL PRES 01/18/2008