

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000124609

Entity Name: MAXWELL URETHANE ROOFING, INC.

FILED
Sep 28, 2009
Secretary of State

Current Principal Place of Business:

2729 EDISON AVENUE
FT. MYERS, FL 33916

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 3740
N FT MYERS, FL 33918

New Mailing Address:

FEI Number: 20-2175577

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAXWELL, DANIEL
2729 EDISON AVENUE
FT. MYERS, FL 33916 US

Name and Address of New Registered Agent:

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

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: MAXWELL, DANIEL
Address: 922 DIPLIMOT ST
City-St-Zip: CAPE CORAL, FL 33909

Title: V () Delete
Name: MAXWELL, JESSE
Address: 6331 NALLE GRADE RD
City-St-Zip: N FT MYERS, FL 33917

Title: S () Delete
Name: LEONARD, JEFF
Address: 2723 SW 8 CT
City-St-Zip: CAPE CORAL, FL 33914

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change () Addition
Name: MAXWELL, JESSE
Address: 4354 ST. CLAIR AVENUE
City-St-Zip: N FT MYERS, FL 33903

Title: () Change () Addition
Name:
Address:
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

Electronic Signature of Signing Officer or Director

OWNE

09/28/2009

Date