

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000138553

FILED
Jan 04, 2005
Secretary of State

Entity Name: COMFORT ENCLOSURES ROOFING & CONTRACTING, INC.

Current Principal Place of Business:

2061 HEASLEY ROAD
ENGLEWOOD, FL 34223

New Principal Place of Business:

Current Mailing Address:

2061 HEASLEY ROAD
ENGLEWOOD, FL 34223

New Mailing Address:

FEI Number: 20-1810727 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WOOD, SHAWN
2061 HEASLEY ROAD
ENGLEWOOD, FL 34223 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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WOOD, SHAWN
Address: 2061 HEASLEY ROAD
City-St-Zip: ENGLEWOOD, FL 34223

Title: S () Delete
Name: HEGGAN, TIMOTHY
Address: 2950 SHAMROCK RD
City-St-Zip: VENICE, FL 34293

Title: V () Delete
Name: JOHNSON, SCOTT T
Address: 1072 REDSTART RD.
City-St-Zip: VENICE, FL 34293

Title: T (X) Delete
Name: BOGART, ANTHONY
Address: 4085 E. VENICE AVENUE
City-St-Zip: VENICE, FL 34292

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: S (X) Change () Addition
Name: WOOD, KIM
Address: 2061 HEASLEY
City-St-Zip: ENGLEWOOD, FL 34223

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SHAWN WOOD

P

01/04/2005

Electronic Signature of Signing Officer or Director

_____ Date