

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000157840

FILED  
Jun 30, 2005  
Secretary of State

Entity Name: OVER THE TOP ROOFING CO., INC.

## Current Principal Place of Business:

833 101ST AVENUE N.  
NAPLES, FL 34108 US

## New Principal Place of Business:

## Current Mailing Address:

833 101ST AVENUE N.  
NAPLES, FL 34108 US

## New Mailing Address:

FEI Number: 20-1904452

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LEGALZOOM NEVADA, INC.  
44 W. FLAGLER ST.  
SUITE 675  
MIAMI, FL 33130 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

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: PRES ( ) Delete  
Name: THOMPSON, ANTHONY  
Address: 833 101ST AVENUE N.  
City-St-Zip: NAPLES, FL 34108 US

Title: SECR ( ) Delete  
Name: WHISMAN, GREG  
Address: 833 101ST AVENUE N.  
City-St-Zip: NAPLES, FL 34108 US

Title: TREAS ( ) Delete  
Name: THOMPSON, CLINTON  
Address: 833 101ST AVENUE N.  
City-St-Zip: NAPLES, FL 34108 US

Title: DIR ( ) Delete  
Name: STARKEY, YOLANDA  
Address: 833 101ST AVENUE N.  
City-St-Zip: NAPLES, FL 34108 US

Title: DIR ( ) Delete  
Name: THOMPSON, VANESSA  
Address: 833 101ST AVENUE N.  
City-St-Zip: NAPLES, FL 34108 US

Title: VP ( ) Delete  
Name: STARKEY, WALTER  
Address: 833 101ST AVENUE N.  
City-St-Zip: NAPLES, FL 34108 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: YOLANDA STARKEY

DIR

06/30/2005

Electronic Signature of Signing Officer or Director

Date