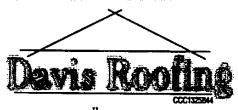
2006 FOR PROFIT CORPORATION

Aug 02, 2006 8:00 am ANNUAL REPORT Secretary of State **DOCUMENT # P04000172259** 08-02-2006 90003 020 ***150.00 1. Entity Name DAVIS ROOFING OF SOUTHWEST FLORIDA, INC Principal Place of Business Mailing Address 873 SE47TH STREET 873 SE47TH STREET SUITE C SUITE C CAPE CORAL FL 33904 CAPE CORAL, FL 33904 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01122006 CR2E034 (11/05) Cha-P City & State City & State Applied For 4. FEI Number 20-Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent DAVIS, CHRISTIAN J SR. Street Address (P.O. Box Number is Not Acceptable) **1823 PICCADILLY CIRCLE** CAPE CORAL, FL 33991 City Zip Code 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. Signiture, typed or printed name of registered agent and 6te if applicable. OKTTE: Registered Agent signeture required when minetations DATE \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2006 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 MLE Delete MLE Addition ☐ Change DAVIS, CHRISTIAN J SR NAME MALE STREET ADDRESS 1823 PICCADILLY CIRCLE STREET ADDRESS CITY-ST-ZIP CAPE CORAL, FL 33991 CITY-ST-ZIP VP TIME ☐ Delete IME ☐ Change ☐ Addition DAVIS, ANGELA L NAME NAME STREET ADDRESS **1823 PICCADILLY CIRCLE** STREET ADDRESS CITY-ST-ZIP CAPE CORAL, FL 33991 CITY-ST-ZIP TIRE D Delete mF ☐ Chance ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete IIRE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZEP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME MALIF STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete MIF ☐ Chance Addition NAME MALES STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-20P

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under ceth; that I am an officer or director of the corporation or the receiver or truestee 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:

FILED





We've Got You Covered!

July 27, 2006

Florida Department of State Division of Corporation 2671 Executive Center Circle Suite 100

Tallahassee, FL 32301

RE: Document No. P04000172259

I have sent back the annual report card at the beginning of April requesting the document papers to be sent to me. Since then I have received a final notice and that has advised me that you have not received my request. I have down loaded the forms, enclosed the check for One Hundred Fifty Dollars and No Cents (\$150.00), and have overnighted this to you for faster processing. I am sending this letter as a request to waive the late fees that may apply to the document number above. Should you need to speak to me, you may contact me at 239-540-1964. If I am unavailable you may speak my office manager, Shannon, which may be reached at the same number.

Sincerely,

Christian J Davis Sr.

President

Cape Coral, FL 33904