

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000027068

FILED
Apr 16, 2009
Secretary of State

Entity Name: TOWNSEND ROOFING AND CONSTRUCTION SERVICES INC.

Current Principal Place of Business:

2080 ST JOHNS BLUFF RD
UNT #2
JACKSONVILLE, FL 32246

New Principal Place of Business:

10418 NEW BERLIN ROAD
UNIT #115
JACKSONVILLE, FL 32226

Current Mailing Address:

2771-29 MONUMENT RD
#338
JACKSONVILLE, FL 32225

New Mailing Address:

FEI Number: 76-0782834 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

TOWNSEND, RANDY
4832 CHARLES BENNETT DRIVE
JACKSONVILLE, FL 32225 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: TOWNSEND, RANDY
Address: 4832 CHARLES BENNETT DRIVE
City-St-Zip: JACKSONVILLE, FL 32225

Title: VP () Delete
Name: TOWNSEND, CHRISTOPHER
Address: 12844 NON GEZER RD
City-St-Zip: JACKSONVILLE, FL 32226

Title: VP () Delete
Name: TOWNSEND, ROBERTA
Address: 4832 CHARLES BENNETT DR
City-St-Zip: JACKSONVILLE, FL 32225

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: TOWNSEND, CHRISTOPHER
Address: 12844 NUNGEZER RD
City-St-Zip: JACKSONVILLE, FL 32226

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: ROBERTA TOWNSEND

VP

04/16/2009

Electronic Signature of Signing Officer or Director

Date