2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 18, 2007
Secretary of State

DOCUMENT# P05000031009

Entity Name: SCOTT CRAWFORD ROOFING, INC.

Current Principal Place of Business:

1296 CONE AVE
PALM BAY, FL 32907

New Principal Place of Business:

Current Mailing Address:

1296 CONE AVE
PALM BAY, FL 32907

New Mailing Address:

FEI Number: 81-0665776 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CRAWFORD, SCOTT
1296 CONE AVE
PALM BAY, FL 32907 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: D ( ) Delete
Name: CRAWFORD, SCOTT
Address: 1296 CONE AVE
City-St-Zip: PALM BAY, FL 32907

Title: D ( ) Delete
Name: HINES, BRIAN
Address: 401 RALEIGH RD SE
City-St-Zip: PALM BAY, FL 32909

Title: D ( ) Delete
Name: GARRISON, JACK C
Address: 2805 CARIBBEAN ISLAES BLVD #602
City-St-Zip: MELBOURNE, FL 32935

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: CRAWFORD, SCOTT
Address: 1296 CONE AVE
City-St-Zip: PALM BAY, FL 32907 US

Title: D (X) Change ( ) Addition
Name: HINES, BRIAN
Address: 1296 CONE AVENUE
City-St-Zip: PALM BAY, FL 32907 US

Title: D (X) Change ( ) Addition
Name: OLSON, MARC
Address: 1296 CONE AVENUE NE
City-St-Zip: PALM BAY, FL 32907 US

I hereby certify that the information supplied with this filing does not qualify for the 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: SCOTT A CRAWFORD D 01/18/2007

Electronic Signature of Signing Officer or Director Date