2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000102764

JOHNSON, SCOTT

VENICE, FL 34285

205 BASE AVE. EAST

Name:

Address: City-St-Zip:

Entity Name: COMFORT ROOFING SYSTEMS, INC.

FILED Jan 05, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 205 BASE AVE. EAST VENICE, FL 34285 **Current Mailing Address: New Mailing Address:** 205 BASE AVE. EAST VENICE, FL 34285 FEI Number: 06-1752705 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WOOD, KIM 205 BASE AVE. EAST VENICE, FL 34285 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition WOOD, KIM Name: Name: 205 BASE AVE. EAST Address: Address: City-St-Zip: VENICE, FL 34285 City-St-Zip: Title: SD Title: () Change () Addition () Delete Name: WOOD, SHAWN Name: 205 BASE AVE. EAST Address: Address: VENICE, FL 34285 City-St-Zip: City-St-Zip: Title: () Delete Title: VD () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: KIM WOOD PD 01/05/2006