

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000128500

FILED  
Mar 28, 2012  
Secretary of State

**Entity Name:** ALL FLORIDA WEATHERPROOFING & CONSTRUCTION INCORPORATED

**Current Principal Place of Business:**

13555 AUTOMOBILE BLVD.  
SUITE 410  
CLEARWATER, FL 33762 US

**New Principal Place of Business:**

4231 112TH TERRACE N  
CLEARWATER, FL 33762 US

**Current Mailing Address:**

13555 AUTOMOBILE BLVD.  
SUITE 410  
CLEARWATER, FL 33762 US

**New Mailing Address:**

4231 112TH TERRACE N  
CLEARWATER, FL 33762 US

**FEI Number:** 75-3201272

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WILLIAMS, GREG L ESQ.  
4554 WINDMILL DRIVE  
INVERNESS, FL 34453 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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: REMMEL, JEFF  
Address: 4231 112TH TERRACE N  
City-St-Zip: CLEARWATER, FL 33762 US

Title: D  
Name: FULFORD, RICK  
Address: 1670 N. BOWMAN TERRACE  
City-St-Zip: HERNANDO, FL 34442 US

Title: D  
Name: REMMEL, JASON V  
Address: 4231 112TH TERRACE N  
City-St-Zip: CLEARWATER, FL 33762

Title: D  
Name: FULFORD, TRAVIS A  
Address: 4231 112TH TERRACE N  
City-St-Zip: CLEARWATER, FL 33762

I hereby 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 all other like empowered.

SIGNATURE: RICK FULFORD

D

03/28/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date