2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000161946

Entity Name: FORD METAL ROOFING, INC.

FILED May 20, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2435 DOBBS ROAD SUITE K ST. AUGUSTINE, FL 32086 US **New Mailing Address: Current Mailing Address:** 2435 DOBBS ROAD SUITE K ST. AUGUSTINE, FL 32086 US FEI Number: 20-3920788 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: MAUST, ROBERT J 1216 N BURGANDY TRAIL JACKSONVILLE, FL 32259 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition MAUST, JOHANNA C MAUST, JOHANNA C Name: Name: 1216 N. BURGANDY TRAIL 1216 N. BURGANDY TRAIL Address: Address: City-St-Zip: JACKSONVILLE, FL 32259 US City-St-Zip: JACKSONVILLE, FL 32259 US Title: Title: (X) Change () Addition () Delete MAUST, ROBERT J Name: Name: MAUST, ROBERT J 1216 N. BURGANDY TRAIL 1216 N. BURGANDY TRAIL Address: Address: JACKSONVILLE, FL 32259 US JACKSONVILLE, FL 32259 US City-St-Zip: City-St-Zip: () Delete Title: Title: SEC () Change () Addition FORD, HAROLD T Name: Name: 29 BERMUDA RUN Address: Address: City-St-Zip: ST. AUGUSTINE, FL 32080 City-St-Zip: Title: () Delete Title: () Change (X) Addition BARTHOLOMEW, GREGORY J Name: Name: Address: Address: 8335 FREEDOM CROSSING TRAIL APT:3408 City-St-Zip: City-St-Zip: JACKSONVILLE, FL 32256 Title: Title: SEC () Change (X) Addition () Delete EMPSON, KIMBAL M Name: Name: Address: Address: 6515 LA MIRANDA DR W #2 City-St-Zip: City-St-Zip: JACKSONVILLE, FL 32217

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: GREGORY BARTHOLOMEW VP 05/20/2008