2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 20, 2007
Secretary of State

DOCUMENT# P05000167836

Entity Name: PARTNERSHIP ROOFING SERVICES, INC.

Current Principal Place of Business:

1726 GUNNERY ROAD NORTH
LEHIGH ACRES, FL 33971

New Principal Place of Business:

Current Mailing Address:

1726 GUNNERY ROAD NORTH
LEHIGH ACRES, FL 33971

New Mailing Address:

FEI Number: 22-3919609 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FLAMMANG, DONNA M ESQ
R&A AGENTS, INC.
2320 FIRST ST., STE. 1000
FT. MYERS, FL 339012904 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DPT ( ) Delete
Name: LAYCHAYPHA, SENGATHITH
Address: 1726 GUNNERY ROAD NORTH
City-St-Zip: LEHIGH ACRES, FL 33971

Title: DVP ( ) Delete
Name: SAYASANE, SOMSANITH
Address: 1726 GUNNERY ROAD NORTH
City-St-Zip: LEHIGH ACRES, FL 33971

Title: S ( ) Delete
Name: LING, SUPASWUD A
Address: 1726 GUNNERY ROAD NORTH
City-St-Zip: LEHIGH ACRES, FL 33971

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change ( ) Addition
Name: THOMAS, TRACY M
Address: 1726 GUNNERY ROAD NORTH
City-St-Zip: LEHIGH ACRES, FL 33971

Title: DVPT (X) Change ( ) Addition
Name: LAYCHAYPHA, SENGATHITH
Address: 1726 GUNNERY ROAD NORTH
City-St-Zip: LEHIGH ACRES, FL 33971

Title: DVP (X) Change ( ) Addition
Name: SAYASANE, SOMSANITH A
Address: 1726 GUNNERY ROAD NORTH
City-St-Zip: LEHIGH ACRES, FL 33971

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: TRACY M THOMAS DPS 07/20/2007

Electronic Signature of Signing Officer or Director Date