

## **2012 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P06000008081

Entity Name: J. M. SMITH ROOFING, INC.

**FILED**  
**Mar 28, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

4268 FLEXER DR  
HERNANDO BEACH, FL 34607 US

**New Principal Place of Business:**

**Current Mailing Address:**

4268 FLEXER DR  
HERNANDO BEACH, FL 34607 US

**New Mailing Address:**

FEI Number: 20-4164900

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SMITH, JOHN M  
4268 FLEXER DR  
HERNANDO BEACH, FL 34607 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: P  
Name: SMITH, JOHN M  
Address: 4268 FLEXER DR  
City-St-Zip: HERNANDO BEACH, FL 34607 US

Title: V  
Name: SMITH, ANDREW J  
Address: 4268 FLEXER DRIVE  
City-St-Zip: HERNANDO BEACH, FL 34607

Title: S  
Name: SMITH, DAVID M  
Address: 10383. E. SIDE AVE  
City-St-Zip: BROOKESVILLE, FL 34607

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: DAVID SMITH

S

03/28/2012

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

\_\_\_\_\_  
Date