2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000082252

Entity Name: FAITH BUILDERS ROOFING, INC.

FILED Jan 17, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5336 HALTATA CT

NEW PORT RICHEY, FL 34655

Current Mailing Address: New Mailing Address:

5336 HALTATA CT

NEW PORT RICHEY, FL 34655

FEI Number: 90-0285458 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

SCHMIDT, CORY WADE, ERIC G 5336 HALTATA CT 5336 HALTATA CT

NEW PORT RICHEY, FL 34655 US NEW PORT RICHEY, FL 34655 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: ERIC G. WADE 01/17/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

 Name:
 SCHMIDT, CORY
 Name:
 WADE, ERIC

 Address:
 5336 HALTATA CT
 Address:
 5336 HALTATA CT

City-St-Zip: NEW PORT RICHEY, FL 34655 City-St-Zip: NEW PORT RICHEY, FL 34655

Title: VPD (X) Delete Title: () Change () Addition

 Name:
 SCHMIDT, CLINT
 Name:

 Address:
 5336 HALTATA CT
 Address:

 City-St-Zip:
 NEW PORT RICHEY, FL 34655
 City-St-Zip:

Title: SD () Delete Title: SD (X) Change () Addition

 Name:
 WADE, ERIC
 Name:
 WADE, LAURA

 Address:
 5336 HALTATA CT
 Address:
 5336 HALTATA CT

City-St-Zip: NEW PORT RICHEY, FL 34655 City-St-Zip: NEW PORT RICHEY, FL 34655

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.

SIGNATURE: ERIC G. WADE PD 01/17/2007