FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P06870** **(0)**

1. Corporation Name

STANDARD ROOFING COMPANY OF GEORGIA, INC.

Principal Place of Business

2971 FLOWERS RD., SOUTH
SUITE 290
ATLANTA GA 30341
US

Mailing Address

P.O. BOX 1309
MONTGOMERY AL 36102
US

3. Date Incorporated or Qualified: **07/25/1985**

3a. Date of Last Report: **07/17/1995**

4. FEI Number: **63-0741062** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☑ No

2. Principal Place of Business

21
22 Suite, Apt. #, etc.
23 City & State
24 Zip
25 Country

2a. Mailing Address

26
27 Suite, Apt. #, etc.
28 City & State
29 Zip
30 Country

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Section 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE | DATE

12. OFFICERS AND DIRECTORS

TITLE PD NAME TAYLOR, W ROBBINS, SR STREET ADDRESS 516 N. MCDONOUGH ST. CITY-ST-ZIP MONTGOMERY AL	☐ DELETE
TITLE V NAME MOOK, PHILLIP STREET ADDRESS 2791 FLOWERS ROAD, S, STE 290 CITY-ST-ZIP ATLANTA GA	☐ DELETE
TITLE D NAME TAYLOR, GEORGE L STREET ADDRESS 516 N MCDONOUGH ST CITY-ST-ZIP MONTGOMERY AL	☐ DELETE
TITLE ST NAME COX, STEVEN C STREET ADDRESS 516 N. MCDONOUGH ST. CITY-ST-ZIP MONTGOMERY AL	☐ DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1-1 TITLE CHAIRMAN / DIRECTOR 1-2 NAME 1-3 STREET ADDRESS 1-4 CITY-ST-ZIP	☑ Change	☐ Addition
2-1 TITLE 2-2 NAME 2-3 STREET ADDRESS 2-4 CITY-ST-ZIP	☐ Change	☐ Addition
3-1 TITLE PRESIDENT / DIRECTOR 3-2 NAME 3-3 STREET ADDRESS 3-4 CITY-ST-ZIP	☑ Change	☐ Addition
4-1 TITLE 4-2 NAME 4-3 STREET ADDRESS 4-4 CITY-ST-ZIP	☐ Change	☐ Addition
5-1 TITLE 5-2 NAME 5-3 STREET ADDRESS 5-4 CITY-ST-ZIP	☐ Change	☐ Addition
6-1 TITLE 6-2 NAME 6-3 STREET ADDRESS 6-4 CITY-ST-ZIP	☐ Change	☐ Addition

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is valid (all), furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Steven C Cox **STEVEN C. COX** 1-23-96 (334)265-1262

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — Daytime Phone Number