## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## 1999 DOCUMENT # P06967 ./

## **FILED** Jul 08, 1999 8:00 am Secretary of State

07-08-1999 90010 034 \*\*\*550.00

1. Corporation		. 0000.	$V_{\perp}$					
GUNTE	r constru	CTION ROOFING	G, INC.					
		•					A LORDINGO ELL GRAND RALLER ALIZAR	
]		••						
Principal Plac	e of Business		Mailing Add	ress			I (BB((Ba) /II Zelif drift 1818 state 1881 Brate attent draw aren draw aren	
696 BRIARFIEL	LD ROAD		696 BRIARFII	ELD ROAD				
SCOTTSVILLE KY 42164 SCOTTSVILLE KY 42164								
							DO NOT WRITE IN THIS SPACE	
							3. Date Incorporated or Qualifed	
							08/02/1985 4, FEI Number Applied For	
2. Principal Place of Business 2a. Mailing Address								
21 26							61-1065364 Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.							5. Certificate of Status Desired Fee Required	
22 City & Sta	<u> </u>	<del></del>	27 City & S	tato				
City & Sta	ie		<del></del>	late	•		6. Election Campaign Financing ☐ \$5.00 May Be Trust Fund Contribution ☐ Added to Fees	
Zip	<del></del> _	Country	Zip Zip		Country			
					30		8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No	
24	25	Address of Curren	29		30		10. Name and Address of New Registered Agent	
	9. Name and	Address of Curren	ı Keğistered Ağı	BUIL	81	Name		
CT	CORPORATION	SYSTEM			"	Hamo		
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD					82	82 Street Address (P.O. Box Number is Not Acceptable)		
PLANTATION FL 33324					83			
1	MITATION FE 3	N2 <del>4</del>			83			
		,			84	City	85 Zip Code	
							ed corporation submits this statement for the purpose of changing its registered	
office or	registered agent	or both in the State i	of Florida Such o	hanne was a	uthorized by	the corn	proporation's board of directors. I hereby accept the appointment as registered	
agent. I a	am familiar with, a	nd accept the obligat	tions of, Section 6	307.0505, Flo	rida Statutes		•	
SIGNATURE							ire required when reinstating) DATE	
40	Signature, typed or pre	nted name of registered agen	D DIRECTORS		13.	t signature	pre required when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
12.	PTD	OFFICERS AN		DELETE	1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
l	NAME GUNTER, J.W. JR.				1.2 NAME			
ACC DELECTED DOLD						1000000		
OCOTTONILE MY 40404					1.3 STREET		55	
CITY-ST-ZIP	<del></del>	E KT 42164		DELETE	1.4 CITY-S	r-ZIP	Executive Vice-Pres Defange Addition	
ππE	VSD		ι	"] DETEIE	2.1 TITLE		Executive Vice-Pres, Definge Addition	
NAME	GUNTER, SU				2.2 NAME		Susan Gunter Rd. 500 Brianfield Rd. Scottsville, Ky 42164	
STREET ADDRESS					2.3 STREET	ADDRESS	55 barbriarti da kai	
CITY-ST-ZIP	SCOTTSVILL				2.4 CfTY-S	T-ZIP	Scotisville, ky 42164	
TITLE		-Preside	<i>7</i> 74	DELETE	3.1 TITLE		Change ☐ Addition	
NAME	Brian	Gunter.	0.1		3.2 NAME			
STREET ADDRESS			KOI,		3.3 STREET	ADDRESS	SSS	
CITY-ST-ZIP	Scott	sville.	4714511	<u> </u>	3.4. CITY-S	T-ZiP		
TITLE		csident	1	DELETE	4.1 TITLE		☐ Change ☐ Addition	
NAME	Gary	Bunter	.0.1		4. 2 NAME			
STREET ADDRESS	Mai k	iacticla	. Rd.	1	4.3 STREET	ADDRESS	ss	
CITY-ST-ZIP	3724	sville ik	<sub>ህ</sub> 421	L4	4.4 CITY-S	-ZIP		
TITLE				DELETE	5.1 TITLE		☐ Change ☐ Addition	
NAME			•		5.2 NAME			
STREET ADDRESS					5.3 STREET	ADDRESS	ss	
CITY-ST-ZIP					5.4 CITY-S	-ZIP		
TITLE	<u> </u>	7		DELETE	6.1 TITLE		☐ Change ☐ Addition	
NAME				=	6.2 NAME			
					6.3 STREET	ADORESS	as	
STREET ADDRESS	'				6.4 CITY-S		~	
CITY-ST-ZIP	1				0.4 (1117-5	-411		

14. I hereby certify that the information supplied with this filing 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, with all other like empowered.

SIGNATURE: