2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P11562

ROWELL ROOFING, INC.



FILED Apr 05, 2007 08:00 All Secretary of State

Principal Place of Business

170 INDUSTRIAL PARK RD COLUMBIA, MS 39429

SIGNATURE

Mailing Address

HWY 35 NORTH BYPASS INDUSTRIAL PK #2 P.O. BOX 647 COLUMBIA, MS 39429



DO NOT WRITE IN THIS SPACE

02132007 No Chg-P CR2E034 (11/05)

Applied For 4. FEI Number 64-0615411 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required

6. Name and Address of Current Registered Agent

CSignature, typed or printed name of registered agent and title if applicable

DAVIS, MILES 425 E. GOVERNMENT STREET PENSACOLA, FL 32501

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8. 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. I am familiar with, and accept the obligations of registered agent.

(NOTE, Registered Agent signature required when reinstating)

*/ ** FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

10,	OFFICERS AND DIRECTORS
TITLE .	D ,
NAME	ROWELL, H.B.
STREET ADORESS	902 ELM STREET
CITY-ST-ZIP	COLUMBIA, MS 39429
TITLE	PD
NAME	ROWELL, RANDALL B.
STREET ADDRESS	142 BRACEY RD
CITY-ST-ZIP	KOKOMO, MS 39643
TITLE	TD
NAME	ROWELL, RENEE
STREET ADDRESS	170 INDUSTRIAL PARK ROAD
CITY-ST-ZIP	COLUMBIA, MS 39429
TITLE	S
NAME	CREEL, FRANK
STREET ADDRESS	170 INDUSTRIAL PARK ROAD
CITY-ST-ZIP	COLUMBIA, MS 39429
TITLE	VP
NAME	KOENENN, JASON
STREET ADDRESS	170 INDUSTRIAL PARK RD
CITY-ST-ZIP	COLUMBIA, MS .39429.
TITLE:	
NAME .	The second of th
STREET ADDRESS	The second of th
CITY-ST-ZIP	
42. I haraby cartifu that the information cumplied with this filling does not qualify for the ave	

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DATE -

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Randall B. Rowell

3/29/07

601-736-9494

Daytime Phone #