FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

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P24017

(6)

Mailing Address

DOCUMENT # 1. Corporation Name DARTON ROOFING, INC.

	-				
	994 HWY 315 FORTSON GA 31808 US				
2. Principal Place of Business		Mailing Addres	is		
	26				
		Suite, Apt. #, @	eto.		
	27				
		City & State			
	28				
Country		Zip	k	untry	
25	29		30		
me and Address of Co	urrent Registe	ered Agent			
				81	Name
	Country 25	2a. 1 26 27 28 Country 29	Stille, Apt. #, 6 City & State 28 Country Country City & State	US siness 2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Country 7ip Co 29 30	US Siness 2a. Mailing Address 26

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04/11/1995

3. Date Incorporated or Qualified 3a. Date of Last Report

04/21/1989

2. Principal Plac	e of Business	2a. Mailing Address		4. fEl Number	Applied For
••• • • • • • • • • • • • • • • • • •	G G. Subility	26		58-1581771	Not Applicable
Suite, Apt. #,	etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State	, , , , , , , , , , , , , , , , , ,	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country 25	Ζφ 29	Country 30	8. This corporation has liability for intangible to Florida Statutes Yes X No	ax under s. 199.032,
24	9. Name and Address of Curren			10. Name and Address of New Registered	Agent
	s. Name and Address of Control		81 Nan	ne	
RDHICHW	VOOD E THOMAS		82 Stre	eet Address (P.O. Box Number is Not Acceptable)	
BRUSHWOOD, E. THOMAS 1353 E LAFAYETTE ST TALLAHASSEE FL 32301 B4 City		L.J			
		83			
			85 Zip Code		
			[] /	r.	anning its registered office
familiar with	the provisions of Sections 607.0507 d agent, or both, in the State of Floring and accept the obligations of, Section 1.	and 607.1508, Florida Statu da. Such change was authori ion 607.0505, Florida Statute	ites, the above named ized by the corporations.	d corporation submits this statement for the purpose of chairs board of directors. Thereby accept the appointment a	s registered agent. I am
SIGNATURE.	Signature, typed or printed name of registered agent	and the if applicance (N	DTE Registered Agents and	ture required which tend it hadDATE	DIDECTORO IN 10
12.		D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12 Change Addition
TITLE	PD	☐ DELETE	1 1 TITLE		☐ criange ☐ Addit dil
NAME	HAMPTON, DARRYL GLENN		1.2 NAME		
STREET ADDRESS	994 HWY 315		1.3 STREET ADDRE	SSS	
CITY-ST-ZIP	FORTON GA		1.4 CHY-ST-71°		Change Addition
TITLE	V	☐ DEFELE	2 11/10		,
NAME	HOGAN, KEVIN	•	2.2 NAME		
STREET ADDRESS	12700 LATE AUTUMN LANI	=	2.3 STREET ADDRE		
CITY - ST - 7IP	TALLAHASSEE FL	[] DELETE	2.4 CI*Y - S* - ZIP 3.1 TITLE		Change Addition
TITLE	S CANDON CANDON	Пише	3 2 NAME		•
NAME	HAMPTON, SANDRA		3.3 STREET ADDE	RF CS.	
STREET ADDRESS	994 HWY 315 FORTSON GA		3 4 CITY - ST - ZIP	!	
CITY-ST-ZIP	FUNTOUN CA	DELETE	4, 1 TITLE		Change Addition
TITLE		<u></u>	4 2 NAME		
NAME STREET ADDRESS			4.3 STREET ADDR	ress	
-			4.4 CITY - ST - ZiP		
CITY-ST-ZIP TITLE		☐ DELETE	5 1 TETLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDR	RESS	
CITY-ST-ZIP			5.4 CHY - ST - ZiP		
TITLE		DELETE	6 111111		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDR	RESS	
CITY-ST-ZIP			€ 4 C!TY - ST - ZIF	P 1 0 1 1 0 1 1 1 1 1	Elorida Statuton I further
F-24	- 416 . Alexa Alexa information cumpling	Lwith this filing is voluntarily for	urnished and does no	of qualify for the exemption stated in Section 119.07(3)(k),	FIGHUA STATUTES. FIGHTER

14. I do hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report of supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under coath, that I am an officer or director of the corporation dyfune receive or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 12 if changed, or an anachment true an address.

SIGNATURE: