

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P28031

FILED
Mar 24, 2009
Secretary of State

Entity Name: MERIDIAN ROOFING COMPANY

Current Principal Place of Business:

802 HWY 19 N
SUITE 190
MERIDIAN, MS 39307

New Principal Place of Business:

Current Mailing Address:

802 HWY 19 N
SUITE 190
MERIDIAN, MS 39307

New Mailing Address:

FEI Number: 64-0661823 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FARRISH, KENNETH
Address: 2000 RIVER EDGE PKWY., ST.E 800
City-St-Zip: ATLANTA, GA 30328

Title: S () Delete
Name: BURNAM, JOHN
Address: 301 HONEYSUCKLE DRIVE
City-St-Zip: HATTIESBURG, MS 39402

Title: TD () Delete
Name: HOOD, WARREN A., JR.
Address: 3900 JAMESTOWN ROAD
City-St-Zip: HATTIESBURG, MS 39402

Title: CFO () Delete
Name: JOHNSON, JOHN
Address: 802 HWY 19 NORTH SUITE 190
City-St-Zip: MERIDIAN, MS 39307

Title: VP (X) Delete
Name: DAVIS, LARRY D
Address: 30 GRAND BAYOU CIRCLE
City-St-Zip: HATTIESBURG, MS 39402

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: JOHN A JOHNSON

CFO

03/24/2009

Electronic Signature of Signing Officer or Director

_____ Date