

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 05, 2001 08:00 AM
Secretary of State

DOCUMENT # P31461

1. Entity Name
PREMIUM ROOFING SERVICE, INC.

Principal Place of Business
2838 WASHINGTON ST
AVONDALE ESTATES GA 300020345
US

Mailing Address
P.O. BOX 345
AVONDALE ESTATES GA 300020345

2. Principal Place of Business
2838 WASHINGTON ST

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
AVONDALE ESTATES GA

City & State

4. FEI Number
58-1585385

Applied For
Not Applicable

Zip
30002

Country
US

Zip
Country

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BASSO JOHN J
8622 VANNOY COURT

ORLANDO FL
328607761 US

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE JOHN J. BASSO

04/05/2001

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE VD ☐ Delete
NAME BENNETT RONNIE
STREET ADDRESS 1860 PENNISTONE WAY
CITY-ST-ZIP SNELLVILLE GA 30078

TITLE SD ☐ Delete
NAME GADDIS BARRY
STREET ADDRESS 7291 SHELL RD
CITY-ST-ZIP WINSTON GA 30187

TITLE VVD ☐ Delete
NAME MAXEY S R
STREET ADDRESS 2867 ORION DRIVE
CITY-ST-ZIP DECATUR GA

TITLE PTC ☐ Delete
NAME GIBSON RANDY L
STREET ADDRESS 4950 LAKE FRONT CT
CITY-ST-ZIP LILBURN GA 30047

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: RANDY L. GIBSON

PRES 04/05/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)