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

PROFIT CORPORATION **ANNUAL REPORT** 

1**9**98

STREET ADDRESS



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name P92000008841 (8)

DON KOENKE ROOFING, INC. Principal Place of Business Mailing Address 1800 NE 27 COURT 1900 NE 27TH COURT LIGHTHOUSE POINT FL 33064 DO NOT WRITE IN THIS SPACE LIGHTHOUSE POINT FL 33064 3. Date Incorporated or Qualified 12/03/1992 4. FEI Number Principal Place of Busines Applied For 65-0375475 Not Applicable \$8.75 Additional 5. Certificate of Status Desired  $\Box$ Fee Required 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agen 10. Name and Address of New Registered Agent 81 Name KOENKE, DONALD R JR **2730 NE 52ND COURT** 82 Str LIGHTHOUSE POINT FL 33064 83 84 11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 60, 0505, Florida Statutes. when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TITLE 1.1 TILLE KOENKE, DONALD R JR NAME 1.2 NAME **2730 NE 52ND COURT** STREET ADDRESS 1.3 STREET ADDRESS LIGHTHOUSE POINT FL 33064 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 21 TITLE KOENKE, TONI 2.2 NAME NAME 2730 NE 52 CT STREET ADDRESS 2.3 STREET ADDRESS LIGHTHOUSE POINT FL 33064 CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TULE 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3 4. CITY - ST - ZIP DELETE Change ☐ Addition TITLE 4.1 TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-7IP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE 6.2 NAME NAME

14. Thereby 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 supplied entries 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

FILED

May 06 1998 8:00am

Secretary of State