2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P9300000568 **DOCUMENT #**

1. Entity Name



FILED Mar 24, 2003 8:00 am Secretary of State

03-24-2003 90177 010 ***150.00

| GARY T. BRINGMAN ROOFING, INC. | | | | | | | | |
|------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|---------------------------------------------------|---------------|-----------------------------------------------------------------|-----------|-------------------------------------------------------------------------------------|--|
| Principal Place of Business 1111 29TH AVENUE WEST BRADENTON FL 34205 2. Principal Place of Business | | 1111 | ng Address 29TH AVENUE WEST DENTON FL 34205 | | | | | |
| | | | , * | | | | | |
| 2. Principal Place of Business | | | 3. Mailing Address | | | 1 | 1 2001/000 HO 19100 AINT 9011 9011 9011 9011 9011 9011 9011 901 | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | | 1 | ☐ CHECK HERE IF MAKING CHANGES | |
| City & Sta | te | City | / & State | | | 4. | FEI Number 65-0377946 Applied For Not Applied be | |
| Zip | Country | | | try | 5. Certificate of Status Desired \$8.75 Additional Fee Required | | | |
| | 6. Name and Address of Current | Registen | ed Agent | | | 7. 1 | Name and Address of New Registered Agent | |
| | | | | | Name | | | |
| | IN, GARY T | | | | Street Address | (P.O. B | Box Number is Not Acceptable) | |
| 1111 29 AVENUE WEST Bradenton FL 34205 | | | | | | | | |
| DRADENI | ON FL 34203 | | | | City | | FL Zip Code | |
| 8. The above | named entity submits this statement fo | r the pure | oose of changing its r | egistere | ed office or registe | ered ad | | |
| the obligat | 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. 1 am familiar with, and accept the obligations of registered agent. | | | | | | | |
| SIGNATURE | | | | | | | | |
| | Signature, typed or printed name of registered agent a | ind title if app | olicable. (NOTE: | Registered | d Agent signature require | d when re | reinstating) DATE | |
| Afte | TILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00 k Payable to Florida Department of | State | | | | | 9. Election Campaign Financing Trust Fund Contribution. S 5.00 May Be Added to Fees | |
| 10. | OFFICERS AND | DIRECTO | DRS | 11. | | AD | DDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
| TITLE NAME | DTVP | | ☐ Delete | TITLE | ı | | ☐ Change ☐ Addition | |
| STREET ADDRESS | BRINGMAN, ELAINE M. 1111 - 29TH AVE W. | | | NAME STREE | ET ADDRESS | | | |
| CITY-ST-ZIP | BRADENTON FL 34205 | | | | -ST-ZIP | | | |
| TITLE | DP | | ☐ Delete | TITLE | | | ☐ Change ☐ Addition | |
| NAME STREET ADDRESS | BRINGMAN, GARY T. 1111 29TH AVE W | | | NAME | E Et address | | | |
| CITY-ST-ZIP | BRADENTON FL 34205 | | | | -ST-ZIP | | | |
| TITLE | s | . سهم احد ا | ~ Delete | -TITLE | | <u></u> | Addition | |
| NAME STREET ADDRESS | BROWN, JEFF | | - | NAME | ET ADDRESS | | | |
| CITY-ST-ZIP | 1111 - 29TH AVE BRADENTON FL 34205 | | | | ST-ZIP | | | |
| TITLE | T | | ☐ Delete | TITLE | | | ☐ Change ☐ Addition | |
| NAME | KARAS, NICK | | • | NAME | | | | |
| STREET ADDRESS CITY-ST-ZIP | 1111 - 29 AVE W BRADENTON FL 34205 | | | 8 | ET ADDRESS ST-ZIP | | | |
| TITLE | DIVIDENTON LE 04200 | | ☐ Delete | TITLE | | | ☐ Change ☐ Addition | |
| NAME | | | | NAME | | | | |
| STREET ADDRESS CITY-ST-ZIP | | | | | T ADDRESS ST-ZIP | | , | |
| TITLE | Y 44. | | Delete | TITLE | | | ☐ Change ☐ Addition | |
| NAME | | | E Delete | NAME | | | Change Addition | |
| STREET ADDRESS | | | | | ET ADDRESS | | | |
| 12. I hereby o | certify that the information supplied with | this filing | does not qualify for the | | ST-ZIP | ection 1 | 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

ELAINE BRINGMAN 3-20-03 746-6643