

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Mar 05, 1999 8:00 am  
Secretary of State

03-05-1999 90021 040 \*\*\*150.00

DOCUMENT # P93000020889

1. Corporation Name

LEADER ROOFING CO. SERVICES, INC.

Principal Place of Business

3500 SOUTH ST.  
TITUSVILLE FL 32780

Mailing Address

3500 SOUTH ST.  
TITUSVILLE FL 32780

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/17/1993

4. FEI Number

59-3171668

Applied For

Not Applicable

5. Certificate of Status Desired ☒ X

\$8.75 Additional  
Fee Required

6. Election Campaign Financing ☐

Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 1480 N. US. #1

2a. Mailing Address

26 P.O. BOX 177

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 TITUSVILLE, FLORIDA

City & State

28 MIMS, FLORIDA

Zip

24 32780

Country

25 U.S.A.

Zip

29 32754

Country

30 U.S.A.

9. Name and Address of Current Registered Agent

BANNISTER, JAMES C  
2604 TOWER ST  
TITUSVILLE FL 32796

10. Name and Address of New Registered Agent

81 Name

JAMES C. BANNISTER

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

83

2223 FREEDOM AVENUE

84 City

MIMS, FLORIDA

FL

85 Zip Code  
32754

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 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME BANNISTER, JAMES C.  
STREET ADDRESS 2604 TOWER STREET  
CITY-ST-ZIP TITUSVILLE FL

TITLE VP ☐ DELETE

NAME L'ARGENT, EDWIN P.  
STREET ADDRESS 1410 THORNTON STREET  
CITY-ST-ZIP TITUSVILLE FL

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P ☒ Change ☐ Addition

1.2 NAME BANNISTER, JAMES C.  
1.3 STREET ADDRESS 2223 FREEDOM AVENUE  
1.4 CITY-ST-ZIP MIMS, FLORIDA 32754

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE VP ☐ Change ☒ Addition

3.2 NAME TOSI, DANIEL  
3.3 STREET ADDRESS 4105 SKYWAY AVENUE  
3.4 CITY-ST-ZIP PORT ST. JOHN, FL. 32927

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (1/98)