

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000020889

1. Entity Name

LEADER ROOFING CO. SERVICES, INC.

FILED
May 30, 2000 8:00 am
Secretary of State

05-30-2000 90088 050 ***150.00

Principal Place of Business

Mailing Address

1480 N US #1
TITUSVILLE FL 32780

P O BOX 177
MIMS FL 32754-0177

2. Principal Place of Business

2412 N. US.1

3. Mailing Address

P.O. BOX 177

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MIMS, FL.32754

City & State

MIMS, FL.32754

4. FEI Number

59-3171668

Applied For

Not Applicable

Zip

32754

Country

USA

Zip

USA

Country

32754

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BANNISTER, JAMES C
2223 FREEDOM AVE
MIMS FL 32754

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

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, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP		TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	
P	BANNISTER, JAMES C.	2223 FREEDOM AVE	MIMS FL 32754	<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
VP	L'ARGENT, EDWIN P.	1410 THORNTON STREET	TITUSVILLE FL	<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
V	TOSI, DANIEL	4105 SKYWAY AVE	PT ST JOHN FL 32927	<input type="checkbox"/> Delete		TOSI, DANIEL	5605 Brandon Street	Port St. John, FL	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

5 April 2000 321-267-7623

CR2E 014 (9/93)