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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000028740 (7)

WERNICKE ROOFING, INC.

Principal Place of Business

5145 DREW STREET BROOKSVILLE FL 34805 Mailing Address

5145 DREW STREET BROOKSVILLE FL 34609

## FILED May 02 1997 8:00am Secretary of State



DHOOKSVILLE	PL 940US		BHOO	MOVILLE PL 34009	-6213							
								3. Date Incorporated or Qualified 04/19/1993		e of Las	t Report	
2. Principal P			<b></b>	2a. Mailing Address				4. FEI Number			Applied For	
	BLAI	R_AVE		26 15250 BLAIR AVE				59-3181215			Not Applicable	
Sulte, Apt.	#, 8(C.		<u> </u>	Suite, Apt. #, etc.				5. Certificate of Status Desired			5 Additional	
22 City & State			[27]	City & State						Fee	Required	
<del></del>			<b>⊢</b> −¬	F-₁ '				6. Election Campaign Financing		<b>\$5.00</b> May Bo		
23 BROOF	OKSVILLE FL Country			PROOKSVILL				Trust Fund Contribution	Ш		d to Fees	
24 34609	.	<del></del>	— — `	34609	Oour	шу		This corporation has liability for its control of the second of the			rs. 199.032,	
24) 3400:		25 and Address of Curre	29 ont Registers		30		·	Florida Statutes  10. Name and Address of New Re		No		
WE			in riogistore	ou Agoin		81	Name	10. Name and Address of New Re	gistereu A	gent		
<b>WERNICKE, NANNIE P</b> <b>*14** POEW-S</b> ERSET 15250 BLAIR AVE												
77.753 PDO		(2636) 1525U	RLAIK	AIR AVE			82 Street Address (P.O. Box Number is Not Acceptable)					
BROOKSVILLE FL 34609												
					1	B4	City			85 Z	ip Code	
44 Duramant	to the provis	ions of Continue CO7 DC	00 614 007	1/00 51-51-05-			L		<u>FL</u>	بليل		
office or re	egi <b>ste</b> red ag	ent, or both, in the State	e of Florida.	Such change was	utes, the abi s authori≱ed	ove by	e-named cor / the corpora	rporation submits this statement for the pation's board of directors. I hereby accep	urpose of a	changin; iintment	g its registered as registered	
agent. I a	m familiar wi	th, and accept the obliq	gations of, Se	ection 607.0505, F	lorida Statu	ites	3.	,				
SIGNATURE												
12,	Signature, lyped	or printed name of registered as OFFICERS AN			-	Age	ent signature requ	uirod when reinstating)	DATE			
TITLE	S/T	OFFICERS	NO DINCOLO	DELETE	13.		<del></del>	ADDITIONS/CHANGES TO OFFIC		Chang		
NAME		, EDWARD		□ bttt it					ı	Criang	e LI Addition	
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		VILLE FL 34609	'NU									
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		VILLE FL 34609					ADDRESS					
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		VILLE FL 34609					ADDRESS					
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CITY-ST-ZIP	BROOKS	VILLE FL 34609			E .		ADDRESS					
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NAME				Dittie					L	onang	e FT Adollion	
STREET ADDRESS					6.2 NAM		Annueno					
j							ADDRESS				İ	
CITY-ST-ZIP	ov certify that	the information supplied	nd with this fi	iling does not ous	6.4 CITY	YOU	motion state	d in Section 119.07(3)(i), Florida Statutes	1 fuelbor	nortif., Al-	ol the	
Intermation	n indicated o Hicer or direc	on This annual report or	supplements or the receive	al annual report is er or trustee empo	true and ac wered to ex	COLU	rrate and tha	to in Section 119.07(3)(f), Fibrial Statutes at my signature shall have the same lega ort as required by Chapter 607, Florida S	l offect ac i	if made	under eath, that	