2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

Apr 28, 2004 8:00 am Secretary of State DOCUMENT # P93000043414 1. Entity Name 04-28-2004 90272 037 ***150.00 DOUG DUNNE ROOFING, INC. Principal Place of Business Mailing Address 22110 BEVERLY AVENUE N.E. 22110 BEVERLY AVENUE N.E. PORT CHARLOTTE FL 33952 PORT CHARLOTTE FL 33952 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (11/03) City & State City & State 4. FEI Number Applied For 65-0415728 Not Applicable Zip Country 7 Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent DÜNNE, DOUGLAS J SR. Street Address (P.O. Box Number is Not Acceptable) 402 BEVERLY AVENUE N.E. PORT CHARLOTTE FL 33952 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature: typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE ☐ Change Addition DUNNE SR., DOUGLAS J. NAME NAME 22110 BEVERLY AVE NE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33952 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME SMITH, WILLIAM A NAME STREET ADDRESS 655 SISTINA STREET STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME DUNNE, TRACY-A .--STREET ADDRESS 22110 BEVERLY AVE STREET ADDRESS CITY-ST-7IP PORT CHARLOTTE FL 33952 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition JONES, MARK JR NAME NAME STREET ADDRESS 7579 HAWCHEY ST. STREET ADDRESS CITY-ST-ZIP NP FL 34287 CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 12. 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 processor 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 attagriment with an address, will rail other the empowered.

FILED

Douglas J Dunne Sr. 4/1/04 94/624-4612