

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P93000046254

1. Entity Name  
CHASSE ROOFING, INC.



Principal Place of Business  
310 W 13TH ST  
PANAMA CITY, FL 32401 US

Mailing Address  
P.O. BOX 16102  
PANAMA CITY, FL 32406 US

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CLERK OF THE COURT  
TALLAHASSEE, FLORIDA



2. Principal Place of Business - No P.O. Box #  
33 S Lake Fox Road  
Suite, Apt. #, etc.

3. Mailing Address  
P.O. Box 4566  
Suite, Apt. #, etc.

11242008 REIN-P CR2E098 (1/07)

City & State  
Winter Haven, FL  
Zip  
33884  
Country  
US

City & State  
Winter Haven, FL  
Zip  
33885  
Country  
US

4. FEI Number  
59-3187546  
Applied For  
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CHASSE, MARK A  
14540 BIG ISLAND POND ROAD  
SOUTHPORT, FL 32409

7. Name and Address of New Registered Agent

Name  
MARK A. CHASSE

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

33 S Lake Fox Road  
City Winter Haven FL Zip Code 33884

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 Mark A. Chasse DATE 11-24-08  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$750.00  
After January 1, 2009, Fee will be \$900.00

10. OFFICERS AND DIRECTORS

TITLE PST  
NAME CHASSE, MARK A  
STREET ADDRESS 14540 BIG ISLAND POND ROAD  
CITY ST ZIP SOUTHPORT, FL 32409 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY ST ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY ST ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY ST ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY ST ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY ST ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PST ☒ Change ☐ Addition  
NAME MARK A. CHASSE  
STREET ADDRESS 33 S Lake Fox Road  
CITY ST ZIP WINTER HAVEN, FL 33884

TITLE  
NAME  
STREET ADDRESS  
CITY ST ZIP ☐ Change ☐ Addition  
700138287217  
11/26/08--01023--006 \*\*758.75

TITLE  
NAME  
STREET ADDRESS  
CITY ST ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY ST ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY ST ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY ST ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.

SIGNATURE: Mark A. Chasse DATE 11-24-08 DAYTIME PHONE # 863-307-4687  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/26/08