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

PROFIT CORPORATION ANNUAL REPORT

> CAMPBELL, ROY L 195 WOODLAKE PARK CR.

MARY ESTHER FL 32569



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P93000055322 (0)

U.S.A 9. Name and Address of Current Registered Agent

R. L. CAMPBELL ROOFING COMPANY, INC.

H. L. CAMPBELL HOOFING COMP			
Principal Place of Business	Mailing Address	T KADHABUL ING NONE SITILL ADIAN ZUMIL ODIN ODINU ONIDI ONIDI HILIO NIBMA INGA IN	
11 N.E. RACE TRACK RD. C-1 FT WALTON BEACH FL 32547	11 N.E. RACE TRACK RD. C-1 FT WALTON BEACH FL 32547-1887		
		 Date Incorporated or Qualified 08/02/1993 	3a. Date of Last Report 03/15/1996
2. Principa Place of Business 21 2 David Street	28. Mailing Address 26 2 David Street	4. FEI Number 59-3205299	Applied F Not Appli
Suite, Apt #, etc. 22 Suite C	Suite, Apt #, etc.	5. Certificate of Status Desired	\$8.75 Addition Fee Required
City & State 23 Ft. Walton Beach, Fl	_ city & State _ 28 Ft. Walton Beach, FL	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May 8 Added to Fees

84 City 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

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Name

SIGNATURE				}
12.	Signature typed or pretest name of registered agent and life if applicable (NOTE OFFICERS AND DIRECTORS	Registered Agent signature	re required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
III(F	'P DELETE	1.1 TITLE	Change Additi	on
NAME	CAMPBELL, ROY L	1.2 NAME		
STREET ADDRESS	11 N.E. RACETRACK RD.	1.3 STREET ADDRESS		ļ
City - ST - ZIP	FORT WALTON BEACH FL 32547	1.4 CITY - ST - ZIP		1
TITLE	DELETE	2.1 TITLE	Change Additi	on
NAV:	- · · · ·	2.2 NAME		
STREET ADDRESS		2.3 STREET ADDRESS		- {
CHY-\$1-72		2.4 City-St-ZiP		
Title	☐ DELETE	3.1 TITLE	Change Additi	00
NAME	_	3.2 NAME		1
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litte	DELETE	41 TITLE	Change Additi	on
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NAM:		5.2 NAME	;	
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CITY - ST - 7/P		5.4 CITY-ST-ZIP	•	
HeF	DELETE	6.1 TITLE	Change Additi	on
NAME		6.2 NAME	·	
STREET ADDRESS		6.3 STREET ADDRESS		ĺ
CHY SI-76		6.4 CITY+ST-ZIP		

14. If do 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 empowerer to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, oil on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Care

Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees

FILED

Apr 28 1997 8:00am

Secretary of State

8. This corporation has liability for intangible tex under s. 199.032. Florida Statutes
Yes
X No

10. Name and Address of New Registered Agent