

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 06, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # P94000040611**

1. Entity Name  
COAST TO COAST ROOFING INC. OF TAMPA BAY



Principal Place of Business      Mailing Address

7302 LOGHOUSE RD      7302 LOGHOUSE RD  
PLANT CITY, FL 33565 US      PLANT CITY, FL 33565 US

**DO NOT WRITE IN THIS SPACE**



03022007      No Chg-P      CR2E034 (11/05)

4. FEI Number      Applied For  
59-3247017      Not Applicable

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

6. Name and Address of Current Registered Agent

YOUNG, TIMOTHY W  
7302 LOGHOUSE RD  
PLANT CITY, FL 33565

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IN THIS SPACE**

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 \_\_\_\_\_ DATE \_\_\_\_\_  
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  
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.            \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

|  |   |
|--|---|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | PST<br>YOUNG, MELISSA<br>7302 LOGHOUSE RD<br>PLANT CITY, FL 33565 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | D<br>YOUNG, TIMOTHY W<br>7302 LOGHOUSE RD<br>PLANT CITY, FL 33565 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   |

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03/15/07-80001-004 150.00

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IN THIS SPACE**

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: Melissa Upmeyer      Date: 3-3-2007      Daytime Phone #: (813)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

623-5788