

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 JUL 17 AM 8:43

DOCUMENT # P94000066816 (7)

1. Corporation Name

WARING ROOFING & REMODELING, INC.

Principal Place of Business

Mailing Address

~~2165 IBIS ISLE RD
PALM BEACH FL 33480~~

1233 45th St

~~2165 IBIS ISLE RD
PALM BEACH FL 33480~~

WEST PALM BEACH, FL 33407

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

3a. Date of Last Report

09/06/1994

4. FEI Number

65-0524033

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

\$5.00 May Be

Trust Fund Contribution

☐

Added to Fees

7. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BASKIN, DOUGLAS

~~2165 IBIS ISLE RD~~

~~PALM BEACH FL 33480~~

1233 45th St.

WPB, FL 33407

81 Name

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

83

84 City

FL

85

Zip Code

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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

(DATE)

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12.

13.

TITLE

D

NAME

BASKIN, DOUGLAS

STREET ADDRESS

~~2165 IBIS ISLE RD~~

CITY - ST - ZIP

~~PALM BEACH FL 33480~~

1233 45th St A3

WPB, FL 33407

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

25 TITLE

26 NAME

27 STREET ADDRESS

28 CITY - ST - ZIP

29 TITLE

30 NAME

31 STREET ADDRESS

32 CITY - ST - ZIP

33 TITLE

34 NAME

35 STREET ADDRESS

36 CITY - ST - ZIP

37 TITLE

38 NAME

39 STREET ADDRESS

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31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

BASKIN, DOUGLAS
1233 45th St. A3
WPB, FL 33407

☒ Change ☐ Addition

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REMITTED BY MAY 1

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13, if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/95

407-845-9417