CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED
95 MAY -1 PM 2:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000082504 (9)

1. Corporation Name
JAMES SHELLEY ROOFING, INC.

Principal Place of Business
5328 MARY ANN LANE
ORLANDO FL 32810

Mailing Address
5328 MARY ANN LANE
ORLANDO FL 32810

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 11/07/1994
3a. Date of Last Report:

2. Principal Place of Business (21) / 2a. Mailing Address (26)
Suite, Apt. #, etc. (22) / (27)
City & State (23) / (28)
Zip (24) / County (25) / Zip (29) / County (30)

4. FEI Number: 59-3382494 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

7. This corporation has equity for exemption per Article 5, 199.023, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

SHELLEY, JAMES W
5328 MARY ANN LANE
ORLANDO FL 32810

10. Name and Address of New Registered Agent

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 of current registered agent required for change) (Signature of new registered agent required for change) (Date)

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|---|---|---|---|
| 31 TITLE | D | 41 TITLE | ☐ Change ☐ Addition |
| 32 NAME | SHELLEY, JAMES W | 42 NAME | |
| 33 STREET ADDRESS | 5328 MARY ANN LANE | 43 STREET ADDRESS | |
| 34 CITY ST ZIP | ORLANDO FL 32810 | 44 CITY ST ZIP | |
| 31 TITLE | D | 41 TITLE | ☐ Change ☐ Addition |
| 32 NAME | SHELLEY, JAMES M | 42 NAME | |
| 33 STREET ADDRESS | 5328 MARY ANN LANE | 43 STREET ADDRESS | |
| 34 CITY ST ZIP | ORLANDO FL 32810 | 44 CITY ST ZIP | |
| 31 TITLE | | 41 TITLE | ☐ Change ☐ Addition |
| 32 NAME | COOK, JAMES | 42 NAME | |
| 33 STREET ADDRESS | #566 Chateau Rd | 43 STREET ADDRESS | |
| 34 CITY ST ZIP | Orl. FL 32808 | 44 CITY ST ZIP | |
| 31 TITLE | | 41 TITLE | ☐ Change ☐ Addition |
| 32 NAME | | 42 NAME | |
| 33 STREET ADDRESS | | 43 STREET ADDRESS | |
| 34 CITY ST ZIP | | 44 CITY ST ZIP | |
| 31 TITLE | | 51 TITLE | ☐ Change ☐ Addition |
| 32 NAME | | 52 NAME | |
| 33 STREET ADDRESS | | 53 STREET ADDRESS | |
| 34 CITY ST ZIP | | 54 CITY ST ZIP | |
| 31 TITLE | | 61 TITLE | ☐ Change ☐ Addition |
| 32 NAME | | 62 NAME | |
| 33 STREET ADDRESS | | 63 STREET ADDRESS | |
| 34 CITY ST ZIP | | 64 CITY ST ZIP | |

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)(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 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: James Shelley, Pres — 4.30.95 (Date) — 407-293-7641 (Daytime Phone #)

(SIGNATURE, ADDITIONAL OR PRINTED NAME OF AUTHORIZED OFFICER OR DIRECTOR)

0080230 CP