## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # P95000085237**

1. Entity Name

STAY-DRY ROOFING OF TAMPA BAY INC.



FILED Feb 07, 2007 08:00 A Secretary of State

Principal Place of Business

9007 HAYMARKET ST. ODESSA, FL 33556 US Mailing Address

9007 HAYMARKET ST. ODESSA, FL 33556 US



DO NOT WRITE IN THIS SPACE

01312007 No Chg-P CR2E034 (11/05)

6. Name and Address of Current Registered Agent

FLORES, DENNIS 9007 HAYMARKET ST ODESSA, FL 33556

## DO NOT WRITE IN THIS SPACE

0020011,			IN	THIS SPACE	
	a named entity submits this statement for the p tions of registered agent.	ourpose of changing its region	stered office or registered agent, or b	oth, in the State of Florida. I am fa	amiliar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and little	if applicable. (NOTE: Regi	stered Agent signature required when reinstating)	DATE	
FIL After M	E NOWI!! FEE IS \$150.00 lay 1, 2007 Fee will be \$550.00	9. Election Campaign F Trust Fund Contributi			
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRECT OP FLORES, DENNIS R 9007 HAYMARKET ST ODESSA, FL 33556	CTORS		0000006258 02/14/07=8008	%02 89-014-150.00
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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DENNIS R-FORES

2-1-07 6

622-1531

Daytime Phone #