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Apr 29 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997	 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P96000009130 (1)**

1. Corporation Name
BOULAIS ROOFING COMPANY

Principal Place of Business

Mailing Address

**6574 BAMBOO AVE.
COCOA FL 32927**

**6574 BAMBOO AVE.
COCOA FL 32927-8905**



3. Date Incorporated or Qualified **01/26/1996** 3a. Date of Last Report **None**

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21 7160 Carillon Ave.	26 7160 Carillon Ave.	59-3377233	☐ Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		
22	27	5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
City & State	City & State	6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
23 Cocoa, Fl.	28 Cocoa, Fl.		
Zip	Zip	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No	
24 32927	29 32927		
Country	Country		
25 U.S.A.	30 U.S.A.		

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BOULAIS, JOSEPH C
6574 BAMBOO AVE.
COCOA FL 32927**

81 Name	Boulais, Joseph C.
82 Street Address (P.O. Box Number is Not Acceptable)	7160 Carillon Ave.
83	
84 City	Cocoa
85 Zip Code	FL 32927

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 *Joseph C. Boulais* **Joseph C. Boulais** **4-24-97**
(Signature type: Typed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D ☐ DELETE	11 TITLE	D ☒ Change ☐ Addition
NAME	BOULAIS, JOSEPH C	12 NAME	Boulais, Joseph C.
STREET ADDRESS	6574 BAMBOO AVE.	13 STREET ADDRESS	7160 Carillon Ave.
CITY- ST- ZIP	COCOA FL 32927	14 CITY- ST- ZIP	Cocoa, Fl. 32927
TITLE	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY- ST- ZIP		2.4 CITY- ST- ZIP	
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY- ST- ZIP		3.4 CITY- ST- ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY- ST- ZIP		4.4 CITY- ST- ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY- ST- ZIP		5.4 CITY- ST- ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY- ST- ZIP		6.4 CITY- ST- ZIP	

14. I 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 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: *Joseph C. Boulais* **Joseph C. Boulais** **4-24-97 (407) 632-9623**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone

CR2E034 (9/96)