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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000062075

1. Corporation Name

CHENAULT ROOFING COMPANY

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Principal Place	e of Business	Mailing Address			6 (00)(90) (to lette eller of	1411 68 111 48 111 88118 1	1311 0 (1001) 4001(1)	
3255 MAJESTIC OAK DR		3255 MAJESTIC OAK DR						
ST CLOUD FL 34771		ST CLOUD FL 34771		DO NOT WRITE IN THIS SPACE				
U\$		US						
					3. Date Incorporated or Qua 07/19/1996	illea		
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number		<u> </u>	olied For
21		26		_	59-3390103			Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		-	5. Certifcate of Status Desire	edi 🗌	\$8.75 A	
22		27		_			Fee Re	
City & State	te	City & State			6. Election Campaign Finance	cing 🔲	\$5.00	•
23	· · · · · · · · · · · · · · · · · · ·	28			Trust Fund Contribution		Added to	
Zip	Country	Zip	Country	y	8. This corporation owes the	current year Inta	engible XYes	Œ Ño
24	25		30		Personal Property Tax: 10. Name and Address of N	ow Pagistarad	·	E1140
<u> </u>	9. Name and Address of Currer	it Registered Agent	81	Name	10. Name and Address of N	ew itegistored	- Ac.	
CHE	ENAULT, WILLIAM E			1401110				
	5 MAJESTIC OAK DR		82	Street Ac	ddress (P.O. Box Number is Not Ac	ceptable)		
1	CLOUD FL 34771		83	,		44 + \$125 431 f		6-11-11
	0.000 12 04771		65	'		4. 线门翻		
	·		84		· · · · · · · · · · · · · · · · · ·	E1	85 Zip C	
11. Pursuant office or r	to the provisions of Sections 607.050 registered agent, or both, in the State am familiar with, and accept the obligations.	2 and 607.1508, Florida Statutes of Florida: Such change was aut tions of, Section 607.0505, Florid	s, the above thorized by da Statute:	/e-named co / the corpora s.	orporation submits this statement fo ation's board of directors. I hereby a	r the purpose of accept the appoir	changing its ntment as rec	registered gistered
SIGNATURE		ALONE I			ulrad when released as 1	DATE		
SIGNATURE	Signature, typed or printed name of registered age		Registered Age		uired when reinstating) ADDITIONS/CHANGES TO	DATE O OFFICERS AN	D DIRECTO	RS IN 12
SIGNATURE	Signature, typed or printed name of registered age OFFICERS AN	ID DIRECTORS	Registered Age		ADDITIONS/CHANGES TO		D DIRECTO	RS IN 12
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CITY-ST-ZIP 14. I 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, with all other like empowered.

6.4 CITY-ST-ZIP