

# 2001 UNIFORM BUSINESS REPORT (UBR)

Reinstatement

0008953

DOCUMENT # P96000068227

1. Entity Name

BAY SHORE ROOFING CO.

01-02

02 SEP 24 AM 11:18

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

11109 NORMANDY PLACE  
SUITE 1  
TAMPA F: 33617

11109 NORMANDY PLACE  
SUITE 1  
TAMPA F: 33617

2. Principal Place of Business

11101 Normandy Place

3. Mailing Address

11101 Normandy Place

Suite, Apt. #, etc.

Suite 2

Suite, Apt. #, etc.

Suite 2

City & State

Tampa Florida

City & State

Tampa Florida

Zip

33617

Country

Hillsborough

Zip

33617

Country

Hillsborough

6. Name and Address of Current Registered Agent

EWERS, EDWARD H  
11109 NORMANDY PLACE  
SUITE 1  
TAMPA FL 33617

7. Name and Address of New Registered Agent

Name  
Ewers, Edward H  
Street Address (P.O. Box Number is Not Acceptable)  
11101 Normandy Place  
Suite 2  
City Tampa FL Zip Code 33617

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

*[Signature]*

Edward H. Ewers

Registered agent

9/19/02

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME PTD  
STREET ADDRESS EWERS, EDWARD H  
CITY-ST-ZIP 11109 NORMANDY PLACE  
TAMPA FL 33617 ☐ Delete

TITLE NAME VSD  
STREET ADDRESS EWERS, EDWARD  
CITY-ST-ZIP 11109 NORMANDY PLACE  
TAMPA F: 33617 ☐ Delete

TITLE NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME PTD ☒ Change ☐ Addition  
STREET ADDRESS Ewers, Edward H  
CITY-ST-ZIP 11101 Normandy place #2  
Tampa Florida 33617

TITLE NAME VSD ☒ Change ☐ Addition  
STREET ADDRESS Ewers, Edward  
CITY-ST-ZIP 11101 Normandy place #2  
Tampa Florida 33617

TITLE NAME ☐ Change ☐ Addition  
STREET ADDRESS 300008025399--1  
CITY-ST-ZIP -09/25/02--01081--027  
\*\*\*\*700.00 \*\*\*\*700.00

TITLE NAME ☐ Change ☐ Addition  
STREET ADDRESS 300008025399--1  
CITY-ST-ZIP -09/25/02--01081--028  
\*\*\*\*208.75 \*\*\*\*208.75

TITLE NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

13. 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 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 11 or Block 12 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

Edward H. Ewers  
President

9/19/02

(813)

899-0078

Date

Daytime Phone #

CR2E034 (10/00)