

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000074740

FILED
Feb 13, 2005
Secretary of State

Entity Name: ROOF-PRO OF TAMPA BAY, INC.

Current Principal Place of Business:

5026 TRENTON ST
TAMPA, FL 33619 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 1464
BRANDON, FL 33509 US

New Mailing Address:

FEI Number: 59-3465912

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOTH, LAWRENCE
PO BOX 1464
BRANDON, FL 33509 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: BOTH, GRACE
Address: PO BOX 388
City-St-Zip: RIVERVIEW, FL 33568

Title: PTD () Delete
Name: BOTH, LAWRENCE
Address: P O BOX 388
City-St-Zip: RIVERVIEW, FL 33568

Title: VPD () Delete
Name: STRUNK, FRANKLIN
Address: 307 5TH AVENUE N/W
City-St-Zip: RUSKIN, FL 33570

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PD (X) Change () Addition
Name: BOTH, LAWRENCE
Address: P O BOX 388
City-St-Zip: RIVERVIEW, FL 33568

Title: VP (X) Change () Addition
Name: STRUNK, FRANKLIN
Address: 307 5TH AVENUE N/W
City-St-Zip: RUSKIN, FL 33570

Title: T () Change (X) Addition
Name: STRUNK, LESLIE
Address: 307 5TH AVENUE N/W
City-St-Zip: RUSKIN, FL 33570

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LAWRENCE BOTH

PD

02/13/2005

Electronic Signature of Signing Officer or Director

Date