

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000024325

1. Entity Name

SUPERB ROOFING, INC.

FILED

Apr 12, 2000 8:00 am
Secretary of State

04-12-2000 90080 001 ***150.00

Principal Place of Business

Mailing Address

3038 NORTH JOHN YOUNG PARKWAY
STE. 25
ORLANDO FL 32804

3038 NORTH JOHN YOUNG PARKWAY
STE. 25
ORLANDO FL 32835-2548

2. Principal Place of Business

3. Mailing Address

922 DOWD AVE

922 DOWD AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

ORLANDO FLORIDA

City & State

ORLANDO FLORIDA

Zip

32804

Country

USA

Zip

32804

Country

USA

4. FEI Number

59-3895070
59-3495070

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

NOLAND, GREG
126 LAKE DRIVE
ORLANDO FL 32811

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

4457 Willow Wind COURT

City

ORLANDO

FL

Zip Code

32835

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, 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, 2000 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
STREET ADDRESS
CITY-ST-ZIP
PD
NOLAND, GREG
126 LAKE DRIVE
ORLANDO FL 32811

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VPTD
FORTIER, STEVE
4220 PARKSIDE DRIVE
ORLANDO FL 32807

☒ 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
STREET ADDRESS
CITY-ST-ZIP
4457 Willow Wind Ct
ORLANDO, FL 32835

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V/T/S
LORI NOLAND
4457 Willow Wind COURT
ORLANDO, FL 32835

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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 another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-06-00 (407) 292-7354

Date

Daytime Phone #