2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000033208

Entity Name: ROBERT SHEPPARD ROOFING SERVICE, INC.

FILED Apr 01, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
	(WOOD DRIVE LLES, FL 3389				
Current Mailing Address:			New Mailing Address:		
	(WOOD DRIVE LES, FL 3389				
FEI Number	r: 59-3504859	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
8812 OAK	RD, ROBERT (WOOD DRIVE LES, FL 3389				
	e named entity te of Florida.	submits this statement for the	purpose of changing its registere	ed office or registered agent, or both,	
SIGNATU	IRE:				
	Electro	nic Signature of Registered Ag	gent	Date	
Election Ca	ımpaign Financin	ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	SHEPPARD, R 8812 OAKWO	OD DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SHEPPARD, D 8812 OAKWO	OD DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (RICHARDS, D 8812 OAKWO LAKE WALES	OD DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: ROBERT SHEPPARD PD 04/01/2009