

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P98000073047

**FILED**  
**Jan 18, 2012**  
**Secretary of State**

**Entity Name:** ROOFMASTER OF SOUTH FLORIDA, INC.

**Current Principal Place of Business:**

4212 LEE BLVD  
LEHIGH ACRES, FL 33971

**New Principal Place of Business:**

**Current Mailing Address:**

4212 LEE BLVD  
LEHIGH ACRES, FL 33971

**New Mailing Address:**

**FEI Number:** 65-0867453

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

TAX, ACCOUNTING & FINANCIAL ASSOCIATES, INC  
809 WALKERBILT ROAD  
SUITE 5  
NAPLES, FL 34110 US

**Name and Address of New Registered Agent:**

TAX & FINANCIAL STRATEGISTS, LLC  
28089 VANDERBILT DR.  
SUITE 201  
BONITA SPRINGS, FL 34134 US

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: THOMAS WANDERON

01/18/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: NEWELL, FRANK D  
Address: 4212 LEE BLVD  
City-St-Zip: LEHIGH ACRES, FL 33971

Title: VP  
Name: NEWELL, PETER  
Address: 4212 LEE BLVD  
City-St-Zip: LEHIGH ACRES, FL 33971

Title: SEC  
Name: NEWELL, PETER  
Address: 4212 LEE BLVD  
City-St-Zip: LEHIGH ACRES, FL 33971

I hereby 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 all other like empowered.

SIGNATURE: FRANK D. NEWELL

PRES

01/18/2012

Electronic Signature of Signing Officer or Director

Date