

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 11, 2002 8:00 am
Secretary of State

09-11-2002 90127 002 ***550.00

DOCUMENT # P98000096417

1. Entity Name
D.R.T. ROOFING, INC.

Principal Place of Business
12725 WINDERMERE ISLE PLACE
WINDERMERE FL 34786

Mailing Address
12725 WINDERMERE ISLE PLACE
WINDERMERE FL 34786

2. Principal Place of Business

3. Mailing Address
P.O. Box 770335

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
ORLANDO, FL

4. FEI Number **65-0876665**

Applied For
 Not Applicable

Zip Country

Zip Country
32877 USA

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ROTH, RICHARD A
3823 COLD CREEK DRIVE
VALRICO FL 33594

Name

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

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

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

(NOTE: Registered Agent signature required when reinstating)

8/31/02

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 \$550.00
After September 13, 2002 Fee will be \$750.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PS** ☐ Delete
 NAME **ROTH, RICHARD A**
 STREET ADDRESS **12725 WINDERMERE ISLE PLACE**
 CITY-ST-ZIP **WINDERMERE FL 34786**

TITLE **PRESIDENT** ☒ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **VICE PRESIDENT** ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **VICE PRESIDENT** ☐ Change ☒ Addition
 NAME **RODREACHA JOHNSON**
 STREET ADDRESS **4087 WENDY DR**
 CITY-ST-ZIP **ORLANDO FL 32818**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **SECRETARY** ☐ Change ☒ Addition
 NAME **JEFFREY J ADAMS**
 STREET ADDRESS **577 GARDEN SPRING CIR**
 CITY-ST-ZIP **WINTER SPRINGS, FL 32708**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Change ☐ Addition
 NAME
 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: *Richard A. Roth* **8/31/02** **305-481-0120**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (4/02)