2000 UNIFORM BUSINESS REPORT (UBR) FILED DOCUMENT # P99000108026 Mar 27, 2000 8:00 am 1. Entity Name **Secretary of State** PRESTIGE ROOFING AND GUTTER, INC. 03-27-2000 90087 047 ***150.00 Principal Place of Business Mailing Address 1883 HIGH ST. i 883 HIGH ST. LONGWOOD FL 32750 2012#10#0# FL 32750 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 3614571 Not Applicable \$8.75 Additional Country Zip Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name ROMINGER, STEPHEN L Street Address (P.O. Box Number is Not Acceptable) 1883 HIGH ST. LONGWOOD FL 32750 Zip Code City 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 (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. VICE PRESIDENT (VP) ☐ Addition ☐ Delete TITLE Rominger, Stephen L. TITLE ROMINGER, STEPHEN L NAME NAME 1883 HIGH 21. STREET ADDRESS 1883 HIGH ST. STREET ADDRESS LONGWOOD, FL CITY-ST-ZIP LONGWOOD FL 32750 CITY-ST-ZIP Addition Change TITLE ☐ Delete ROBINSON, FRANK J. TITLE NAME NAME 1883 HIGH ST STREET ADDRESS STREET ADDRESS 32750 LONGWOOD, FL CITY-ST-ZIP CITY-ST-ZIP VICE PRESIDENT (VP) ☐ Change □ L∆ddfilon Delete TITLE TITLE DEREPENTIONY, ANTHONY H. NAME NAME 1883 HIGH STREET ADDRESS STREET ADDRESS FL 32750 LONGWOOD . CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change ☐ Delete TITLE TITLE SHEPPARD THOMAS J. NAME 1883 HIGH ST. STREET ADDRESS STREET ADDRESS FL 32750 CITY-ST-ZIP LONGWOOD CITY-ST-ZIP Addition ☐ Change TITLE ☐ Delete TITLE NAME ROBINSON, NAME

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.

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

1883 HIGH'

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

Delete

CR2E034 (9/99)

☐ Addition

☐ Change