

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 91249 044 ***150.00

**2004 FOR PROFIT CORPORATION
 ANNUAL REPORT**

DOCUMENT # S76524 1. Entity Name SUNSTATE ROOFING COMPANY, INC.																									
Principal Place of Business 4811 110TH TERR. N. CLEARWATER, FL 33762		Mailing Address 4811 110TH TERR. N. CLEARWATER, FL 34622																							
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.		94083418 																					
City & State		City & State		4. FEI Number 59-3090494																					
Zip		Zip		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required																					
6. Name and Address of Current Registered Agent WISENBETTER, ROBERT S 17470 FT DADE AVE BROOKSVILLE, FL 34601				7. Name and Address of New Registered Agent Name Robert S. Wisenbaker Street Address (P.O. Box Number is Not Acceptable) 17470 FT DADE AVE City Brooksville State FL Zip Code 34601																					
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 <i>Robert S. Wisenbaker</i> DATE _____ Signature, typed or printed name of registered agent and title if applicable NOTE: Registered Agent signature required when re-registering																									
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees																						
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11																						
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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.																									
SIGNATURE: <i>Robert S. Wisenbaker</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR																									