

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

93 MAY -1 11 5:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S99877 (0)

1. Corporation Name

COMMERCIAL ROOFING TECHNOLOGIES, INC.

Principal Place of Business

**7213 NORTH 40TH ST.
TAMPA FL 33604**

Mailing Address

**7213 NORTH 40TH ST.
TAMPA FL 33604**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
12/12/1991

3a. Date of Last Report
06/14/1994

2. Principal Place of Business

21 7910 Professional Place

2a. Mailing Address

26 P. O. Box 291187

4. FEI Number

59-3096855

Applied For

Not Applicable

State, Apt # etc

State, Apt # etc

5. Certificate of Status Desired

☒

**\$8.75 Additional
Fee Required**

City & State

23 Tampa, Florida

City & State

28 Tampa, Florida

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

Zip

24 33637

Location

25 Hillsborough

Zip

29 33687

Location

30 Hillsborough

8. This corporation has liability for intangible tax under § 199.033, Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

**LOPEZ, THOMAS H.
7213 N. 40TH ST.
TAMPA FL 33604**

10. Name and Address of New Registered Agent

**B1 Name Jeffrey D. Willis
B2 Street Address, IP or Box Number is Not Acceptable
618 King Henry Court
B3
B4 City Seffner FL B5 Zip Code 33584**

11. Pursuant to the provisions of Sections 607.0901, and 607.1504, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligation to, the laws of the State of Florida.

SIGNATURE

Jeffrey D. Willis

Jeffrey D. Willis, President

4/19/95

12. OFFICERS AND DIRECTORS

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12

NAME	M LOPEZ, THOMAS H.
STREET ADDRESS	7213 NORTH 40TH STREET
CITY, ST, ZIP	TAMPA FL
NAME	DV LOPEZ, TIMOTHY
STREET ADDRESS	929 BEACON ST.
CITY, ST, ZIP	TAMPA FL
NAME	DVTS WILLIS, DAVID H.
STREET ADDRESS	2760 BUCKHORN OAKS
CITY, ST, ZIP	VALRICO FL
NAME	DP WILLIS, JEFFREY D
STREET ADDRESS	618 KING HENRY CT.
CITY, ST, ZIP	SEFFNER FL
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

1. NAME	DELETE	☐ Change ☐ Addition
2. STREET ADDRESS		
3. CITY, ST, ZIP		
4. NAME	DELETE	☐ Change ☐ Addition
5. STREET ADDRESS		
6. CITY, ST, ZIP		
7. NAME		☐ Change ☐ Addition
8. STREET ADDRESS		
9. CITY, ST, ZIP		
10. NAME		☐ Change ☐ Addition
11. STREET ADDRESS		
12. CITY, ST, ZIP		
13. NAME		☐ Change ☐ Addition
14. STREET ADDRESS		
15. CITY, ST, ZIP		

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 130.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made in person. That I am an officer or director of this corporation or the treasurer or financial officer empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears on Block 12 or Block 13 of this report, or on an attachment with this address.

SIGNATURE:

Jeffrey D. Willis

Jeffrey D. Willis, President 4/19/95

(813) 989-2356

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR