## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

CORPORATION **ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

DOCUMENT # V46567

(6)

WERNICKE AND WERNICKE A-1 ROOFING INC.

Principal Place of Business

5145 DREW ST

Mailing Address

ELIE DOESN OF

## **FILED** May 02 1997 8:00am Secretary of State



BROOKSVILLE FL 34809		BROOKSVILLE FL 34809-8213			
				3. Date Incorporated or Qualified 06/29/1992	3a. Date of Last Report 03/21/1996
	lace of Business	2a. Mailing Address	***************************************	4. FEI Number	Applied For
	50 BLAIR AVE	26 15250 BLA	IR AVE	<u>59-3132179</u>	Not Applicable
Suite, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	OKSVILLE FL	City & State  28 BROOKSVI	LLE FL	Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for	intangible tax under s 199 032,
24 346C	9. Name and Address of Curren	29 34609	30 HERNAnd	O Florida Statutes	Yes No
1450		t negistered Agent	81 Name	10. Name and Address of New Re	gistered Agent
WERNICKE, JAMES E.			I Ivanie		
	15250	BLAIR AVE	82 Street	Address (P.O. Box Number is Not Acceptat	ole)
BHU	OKSVILLE FL 34609		83		
			63		
			84 Cily		<b>85</b> Zip Code
11 Pursuant t	to the provisions of Sections 607 000	2 and CO7 1500 Florida Ctabula			FL S Zip Code
office or re agent. I ar SIGNATURE	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was au ations of, Section 607.0505, Flor	ithorized by the corp ida Statutes.	corporation submits this statement for the p poration's board of directors. I hereby accep	of the appointment as registered
	Signature, typed or printed name of registered age	of and title if applicable (NOTE:	Registered Agent signature	required when reinstating)	DATE
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	
FITLE	D	☐ DELF1E	1.1 TITLE		Change Addition
NAME	WERNICKE, NANNIE P.		1.2 NAME		
STREET ADDRESS	5145 DREW ST		1.3 STREET ADDRESS		
CITY-ST-ZIP	BROOKSVILLE FL 34609		1.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	2.1 TITLE		Change Addition
NAME	WERNICKE, PAUL		2.2 NAME		
STREET ADDRESS	5145 DREW ST		2.3 STREET ADDRESS	•	
CITY-ST-ZIP	BROOKSVILLE FL 34609		2. 4 CHY+ST-ZIP		
TITLE	VP	DELETE	3.1 7ITLE		Change Addition
NAME	HARVARD, PATRICK		3.2 NAMŁ		
STREET ADDRESS	5145 DREW ST		3 3 STREET ADDRESS		
CITY-ST-ZIP	BROOKSVILLE FL 34609		3.4 CITY-ST-ZIP		
TITLE	ST	DELETE	4 1 TRLE		☐ Change ☐ Addition
NAME	RIVERBARK, JÉSSEE DAVID		4 2 NAME		
STREET ADDRESS	5145 DREW ST		4.3 STREET ADDRESS		
CITY-ST-ZIP	BROOKSVILLE FL 34609	· <del></del>	4.4 CHY-S1-7IP		
TITLE		☐ DELETE	5.1 TH LE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		T person	5.4 CITY - ST - ZIP		
TITLE		L. DELETE	6.1 TIFLE		☐ Change ☐ Addition
			6.2 NAME		
NAME STREET ADDRESS CITY-ST-ZIP			6 3 STREET ADDRESS		