

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V74057

Entity Name: J.A. TAYLOR ROOFING, INC.

FILED
Mar 10, 2009
Secretary of State

Current Principal Place of Business:

302 MELTON DRIVE
FT PIERCE, FL 34982 US

New Principal Place of Business:

Current Mailing Address:

302 MELTON DRIVE
FT PIERCE, FL 34982 US

New Mailing Address:

FEI Number: 65-0441206

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAYLOR, JAMES A. SR.
700 FRENCH CREEK LN
FT PIERCE, FL 34982 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: TAYLOR, JAMES A., SR.,
Address: 700 FRENCH CREEK LN
City-St-Zip: FT PIERCE, FL

Title: ST () Delete
Name: TAYLOR, PATRICIA,
Address: 700 FRENCH CREEK LN
City-St-Zip: FORT PIERCE, FL 34982

Title: VP () Delete
Name: TAYLOR, STEVEN K
Address: 302 MELTON DRIVE
City-St-Zip: FORT PIERCE, FL 34982

Title: VP () Delete
Name: TAYLOR, CHAD
Address: 605 FRENCH CREEK LANE
City-St-Zip: FORT PIERCE, FL 34982

Title: VP () Delete
Name: WHITE, KYLE
Address: 4901 GATOR TRACE LANE
City-St-Zip: FORT PIERCE, FL 34982

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: TAYLOR, CHAD
Address: 700 FRENCH CREEK LANE
City-St-Zip: FORT PIERCE, FL 34982

Title: VP (X) Change () Addition
Name: WHITE, KYLE
Address: 2401 WINDING CREEK LANE
City-St-Zip: FORT PIERCE, FL 34981

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES A. TAYLOR, SR.

P

03/10/2009

Electronic Signature of Signing Officer or Director

Date