

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# K78063

**Entity Name:** REDLAND ROOFING, INC.

**Current Principal Place of Business:**

16989 SW 274 ST  
HOMESTEAD, FL 33031

**Current Mailing Address:**

16989 SW 274 ST  
HOMESTEAD, FL 33031

**FEI Number:** 65-0111894

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

NIELSEN, SCOTT L.  
16989 SW 274 ST  
HOMESTEAD, FL 33031 US

*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

**Officer/Director Detail :**

|                 |                   |                 |                    |
|-----------------|-------------------|-----------------|--------------------|
| Title           | PD                | Title           | STD                |
| Name            | NIELSEN, SCOTT L. | Name            | NIELSEN, MARY JANE |
| Address         | 16989 SW 274 ST   | Address         | 16989 SW 274ST     |
| City-State-Zip: | HOMESTEAD FL      | City-State-Zip: | HOMESTEAD FL       |

*I hereby 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 all other like empowered.*

**SIGNATURE:** SCOTT NIELSEN

**PRESIDENT**

**03/08/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date