

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000007250

FILED
Apr 14, 2007
Secretary of State

Entity Name: A-1 SERVICES ROOFING SPECIALISTS INC

Current Principal Place of Business:

1120 HARRISON CT
MOBILE, AL 36695

New Principal Place of Business:

Current Mailing Address:

1120 HARRISON CT
MOBILE, AL 36695

New Mailing Address:

2370 HILLCREST RD
STE G #152
MOBILE, AL 36695

FEI Number: 05-0630404

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONTRACTORS REPORTING SERVICE INC
2001 W BUSCJH BLVD A
TAMPA, FL 33612 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: SHIMLEY, VANCE
Address: 1120 HARRISON CT
City-St-Zip: MOBILE, AL 36695

Title: V () Delete
Name: STEVENSON, PAT
Address: 7525 THREE NOTCH RD
City-St-Zip: MOBILE, AL 36619

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SHIMLEY, VANCE E
Address: 1120 HARRISON CT
City-St-Zip: MOBILE, AL 36695

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

I hereby certify that the information supplied with this filing does not qualify for the 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: VANCE E SHIMLEY

P

04/14/2007

Electronic Signature of Signing Officer or Director

_____ Date