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FILED

**Apr 11 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # F92000000545 (5)

1. Corporation Name HUNTINGTON ROOFING INC.



Principal Place of Business 910 N. HIGHLAND AVE. INDIANAPOLIS IN 46202
Mailing Address 910 N. HIGHLAND AVE. INDIANAPOLIS IN 46202-3551

3. Date Incorporated or Qualified 12/08/1992
3a. Date of Last Report 03/20/1996

2. Principal Place of Business **2a. Mailing Address**

4. FEI Number 35-1395277
 Applied For
 Not Applicable

21 Suite, Apt. #, etc. **26** Suite, Apt. #, etc.

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

22 City & State **27** City & State

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

23 Zip **28** Zip

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

24 Country **25** Country **29** Country **30** Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HUNTINGTON, ROBERT F
1920 EDGWOOD #R12
LAKELAND FL 33803

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **85** Zip Code **FL**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *Robert F. Huntington* *Robert F. Huntington* *1 APR 97*
(Signature, typed or printed name of registered agent and fee if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	P	<input type="checkbox"/> DELETE
NAME	HUNTINGTON, MARY ANN	
STREET ADDRESS	5145 FALL CREEK RD.	
CITY - ST - ZIP	INDIANAPOLIS IN 46220	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	HUNTINGTON, JAMES ROBERT	
STREET ADDRESS	7020 BLUFF GROVE LANE	
CITY - ST - ZIP	INDIANAPOLIS IN	
TITLE	S	<input type="checkbox"/> DELETE
NAME	HUNTINGTON, DAVID MICHAEL	
STREET ADDRESS	12053 LAUREL OAKS DR.	
CITY - ST - ZIP	INDIANAPOLIS IN 46220	
TITLE	T	<input type="checkbox"/> DELETE
NAME	HUNTINGTON, ROBERT FREEMAN	
STREET ADDRESS	5145 FALL CREEK RD.	
CITY - ST - ZIP	INDIANAPOLIS IN 46220	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Robert F. Huntington* *1 Apr 97 317-635-2928*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)