

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000056363

FILED  
Apr 01, 2005  
Secretary of State

**Entity Name:** PROFESSIONAL INSULATORS OF SOUTH FLORIDA, INC.

**Current Principal Place of Business:**

1209 SW. SWINTON AVE.  
DELRAY BCH, FL 33444

**New Principal Place of Business:**

1209 S. SWINTON AVE.  
DELRAY BCH, FL 33444

**Current Mailing Address:**

1209 SW. SWINTON AVE.  
DELRAY BCH, FL 33444

**New Mailing Address:**

**FEI Number:** 65-1105387      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

ROGERS, JAMES B  
1209 S. SWINTON AVE.  
DELRAY BCH, FL 33444      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: VP      ( ) Delete  
Name: THOMAS, JACK T JR.  
Address: 1929 NW 62 TERR  
City-St-Zip: MARGATE, FL 33063

Title: P      ( ) Delete  
Name: ROGERS, JAMES B  
Address: 2734 W PATRICK CIRCLE  
City-St-Zip: WEST PALM BEACH, FL 33406

Title: ST      ( ) Delete  
Name: ROGERS, PAMELA K  
Address: 2734 W PATRICK CIRCLE  
City-St-Zip: WEST PALM BEACH, FL 33406

**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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JACK T. THOMAS, JR.

VP

04/01/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date