## 2010 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F05000007302

Entity Name: BCI INSULATION OF JACKSONVILLE, INC.

FILED Jan 06, 2010 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

2504 HWY. 96 302 JAMES E WILLIAMS INDUSTRIAL DR. FORT VALLEY, GA 31030

BYRON, GA 31008

**Current Mailing Address: New Mailing Address:** 

302 JAMES E WILLIAMS IND. DR 302 JAMES E WILLIAMS INDUSTRIAL DR.

**BYRON, GA 31008** BYRON, GA 31008

FEI Number: 55-0902186 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

FAIRCLOTH, JASON FAIRCLOTH, JASON 899 SCRUB JAY DR. 175 CUMBERLAND PARK DR

ST. AUGUSTINE, FL 32092 US ST. AUGUSTINE, FL 32095

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.

01/06/2010 SIGNATURE: JASON FAIRCLOTH

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title:

BENTLEY, KEVIN W Name: P.O. BOX 892 Address:

City-St-Zip: FORT VALLEY, GA 31030

Title: VC

Name: HOOTS, BENJAMIN C P.O. BOX 892 Address:

FORT VALLEY, GA 31030 City-St-Zip:

Title: VC

FAIRCLOTH, JASON Name: 899 SCRUB JAY DR Address: City-St-Zip: ST. AUGUSTINE, FL 32092

Title: SEC

BENTLEY, ASHLEY Name: Address: PO BOX 892

City-St-Zip: FORT VALLEY, GA 31030

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: JASON FAIRCLOTH VC. 01/06/2010