2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 03, 2009
Secretary of State

DOCUMENT# 555312

Entity Name: DAVIDSON INSULATION & ACOUSTICS, INC.

Current Principal Place of Business:

2200 MURPHY CT
NORTH PORT, FL 34289 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 380939
MURDOCK, FL 339380939 US

New Mailing Address:

FEI Number: 59-1783032 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BLANCHARD, EDWARD E., III
13700 LAKE POINT COURT
PORT CHARLOTTE, FL 33953 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: PT ( ) Delete
Name: BLANCHARD, EDWARD E.,III
Address: 13700 LAKE POINT CT
City-St-Zip: PORT CHARLOTTE, FL 33953

Title: V ( ) Delete
Name: BLANCHARD, EDWARD E IV
Address: 7551 TRILLIUM BLVD
City-St-Zip: SARASOTA, FL 34241

Title: S ( ) Delete
Name: BLANCHARD, CONSTANCE B
Address: 13700 LAKE POINT CT
City-St-Zip: PORT CHARLOTTE, FL 33953

Title: T ( ) Delete
Name: HENSON, HEATHER B
Address: 2363 JASMINE WAY
City-St-Zip: NORTH PORT, FL 34287

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:

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

I hereby certify that the information supplied with this filing does not qualify 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: EDWARD E. BLANCHARD, III PT 04/03/2009

Electronic Signature of Signing Officer or Director Date