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Jan 28 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 # 629619 (8)

1. Corporation Name
HOLLIMYER INSULATION, INC.

Principal Place of Business

1534 HENDRY ST.
SUITE 201
FORT MYERS FL 33901
US

Mailing Address

1534 HENDRY ST.
SUITE 201
FORT MYERS FL 33901-2985
US

2. Principal Place of Business

21 Suite, Apt. #, etc

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc

27 City & State

28 Zip

29 Country

3. Date Incorporated or Qualified

07/13/1979

3a. Date of Last Report

02/06/1996

4. FEI Number

59-1957194

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

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

9. Name and Address of Current Registered Agent

STEWART, WILLIAM L.
1534 HENDRY STREET
SUITE 201
FORT MYERS FL 33901

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

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

Signature, type or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME CLARK, HUGH A., JR.
STREET ADDRESS 896 CYPRESS LK. CIRCLE
CITY - ST - ZIP FORT MYERS FL ☐ DELETE

TITLE ST
NAME CLARK, RUTH J.
STREET ADDRESS 896 CYPRESS LK. CIRCLE
CITY - ST - ZIP FORT MYERS FL ☐ DELETE

TITLE VP
NAME CLARK, HARVEY A.
STREET ADDRESS 896 CYPRESS LK. CIRCLE
CITY - ST - ZIP FORT MYERS FL ☐ DELETE

TITLE AS
NAME STEWART, WILLIAM L.
STREET ADDRESS 1534 HENDRY ST., #201
CITY - ST - ZIP FORT MYERS FL ☐ DELETE

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ 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, changed or on a statement with an address

SIGNATURE: *Hugh A. Clark Jr.*
HUGH A. CLARK JR. President

16 Jan 97 941-481-3029

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)