

2004 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
Mar 24, 2004 8:00 am
Secretary of State

03-24-2004 90014 006 ***150.00

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1. Entity Name
SHOOK & FLETCHER INSULATION, CO.



Principal Place of Business
4625 VALLEYDALE ROAD
P.O. BOX 380501
BIRMINGHAM, AL 35238-7501

Mailing Address
4625 VALLEYDALE ROAD
P.O. BOX 380501
BIRMINGHAM, AL 35238-7501

44020295



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03162004

Chg-P

CR2E034 (10/03)

4. FEI Number
63-0275031

Applied For
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE D ☒ Delete
NAME KILLON, WAYNE W SR
STREET ADDRESS 4625 VALLEY DALE RD
CITY-ST-ZIP BIRMINGHAM, AL 35242

TITLE V ☐ Delete
NAME OWINGS, W. L.
STREET ADDRESS 4625 VALLEYDALE RD
CITY-ST-ZIP BIRMINGHAM, AL 35242

TITLE V ☐ Delete
NAME JACKSON, J. D.
STREET ADDRESS 4625 VALLEYDALE ROAD
CITY-ST-ZIP BIRMINGHAM, AL 35242

TITLE VFTS ☐ Delete
NAME STRICKLIN, RICKY
STREET ADDRESS 4625 VALLEYDALE ROAD
CITY-ST-ZIP BIRMINGHAM, AL 35242

TITLE P ☐ Delete
NAME KILLION, WAYNE W. JR.
STREET ADDRESS 4625 VALLEY DALE RD
CITY-ST-ZIP BIRMINGHAM, AL 35242

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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NAME
STREET ADDRESS
CITY-ST-ZIP

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Ricky M. Stricklin

Ricky M. Stricklin, V.P.-Finance

3/16/04 205-991-7606

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #