

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000004181

FILED  
Mar 07, 2007  
Secretary of State

Entity Name: INSTALLATION SOLUTIONS, INC., OF OHIO

## Current Principal Place of Business:

1375 KEMPER MEADOW DRIVE, SUITE 5  
CINCINNATI, OH 45240

## New Principal Place of Business:

3150 STATE LINE RD.  
NORTH BEND, OH 45052

## Current Mailing Address:

1375 KEMPER MEADOW DRIVE, SUITE 5  
CINCINNATI, OH 45240

## New Mailing Address:

3150 STATE LINE RD  
NORTH BEND, OH 45052

FEI Number: 31-1701611

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: PCD ( ) Delete  
Name: REDMON, JOHN  
Address: 2900 WALKER ROAD  
City-St-Zip: CORYDON, IN 47112

Title: VD ( ) Delete  
Name: JENSEN, JOHN  
Address: 194 W. DILCREST  
City-St-Zip: FLORENCE, NY 41042

Title: SD (X) Delete  
Name: LARUE, DAVE  
Address: 6725 VIENNA WOODS TRAIL  
City-St-Zip: DAYTON, OH 45459

Title: TD ( ) Delete  
Name: CROSS, DAN  
Address: 11808 CEDARCREEK DRIVE  
City-St-Zip: CINCINNATI, OH 45240

## 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: TD (X) Change ( ) Addition  
Name: CROSS, DAN  
Address: 1321 CLIFTMONT CIR  
City-St-Zip: LAWRENCEBURG, IN 47025

I hereby certify that the information supplied with this filing does not qualify for the 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: DAN CROSS

TD

03/07/2007

Electronic Signature of Signing Officer or Director

Date