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FILED

Feb 14 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mathis  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # F96000001835 (5)

1. Corporation Name

INSTALLERS' SERVICE WAREHOUSE, INC.



Principal Place of Business

15710 JFK BLVD #700  
HOUSTON TX 77032

Mailing Address

15710 JFK BLVD #700  
HOUSTON TX 77032-2357

3. Date Incorporated or Qualified

04/12/1996

3a. Date of Last Report

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

30 Country

4. FEI Number

76-0496088

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	DP	<input type="checkbox"/> DELETE
NAME	HOFFMAN, MARK S	
STREET ADDRESS	15710 JFK BLVD #700	
CITY-ST-ZIP	HOUSTON TX 77032	
TITLE	DVS	<input type="checkbox"/> DELETE
NAME	LAUVER, E EUGENE	
STREET ADDRESS	15710 JFK BLVD #700	
CITY-ST-ZIP	HOUSTON TX 77032	
TITLE	V	<input type="checkbox"/> DELETE
NAME	PRESTON, MICHAEL L	
STREET ADDRESS	15710 JFK BLVD #700	
CITY-ST-ZIP	HOUSTON TX 77032	
TITLE	V	<input type="checkbox"/> DELETE
NAME	BARBEAU, DAVID C	
STREET ADDRESS	15710 JFK BLVD #700	
CITY-ST-ZIP	HOUSTON TX 77032	
TITLE	V	<input type="checkbox"/> DELETE
NAME	BECKSTETT, DOUGLAS G	
STREET ADDRESS	15710 JFK BLVD #700	
CITY-ST-ZIP	HOUSTON TX 77032	
TITLE	VCFO	<input checked="" type="checkbox"/> DELETE
NAME	DELANEY, WILLIAM J	
STREET ADDRESS	15710 JFK BLVD #700	
CITY-ST-ZIP	HOUSTON TX 77032	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	VP CFO	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	JOHN L HENDRIX	
1.3 STREET ADDRESS	15710 JFK BLVD, STE 700	
1.4 CITY-ST-ZIP	HOUSTON, TX 77032	
2.1 TITLE	SR. V.P.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	RALPH D. NEMETH	
2.3 STREET ADDRESS	15710 JFK BLVD, STE 700	
2.4 CITY-ST-ZIP	HOUSTON, TX 77032	
3.1 TITLE	SR. V.P.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	CLARENCE J GABRIEL, JR	
3.3 STREET ADDRESS	15710 JFK BLVD, STE 700	
3.4 CITY-ST-ZIP	HOUSTON, TX 77032	
4.1 TITLE	Asst VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	WILLIAM H. EDWARDS	
4.3 STREET ADDRESS	15710 JFK BLVD STE 700	
4.4 CITY-ST-ZIP	HOUSTON TX 77032	
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 if changed, or on an attachment with an address.

SIGNATURE: William H. Edwards  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0495371

CR2E034 (9/96)