2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2009
Secretary of State

DOCUMENT# H34814

Entity Name: QUALITY INSULATION OF TAMPA, INC.

Current Principal Place of Business:

1720 LAND O LAKES BLVD
LUTZ, FL 33549

New Principal Place of Business:

Current Mailing Address:

9420 LAZY LANE
P O BOX 270104
TAMPA, FL 33688

New Mailing Address:

1720 LAND O LAKES BLVD
LUTZ, FL 33549

FEI Number: 59-2489961 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HICKMAN, ROBERT
22745 SOUTHSHORE DR
LAND O LAKES, FL 34639 US

Name and Address of New Registered Agent:

HICKMAN, ROBERT
1720 LAND O LAKES BLVD
LUTZ, FL 33549 US

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: _____ 04/27/2009
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: HICKMAN, ROBERT
Address: 744 SOUTH SHORE DRIVE
City-St-Zip: LAND O'LAKES, FL

Title: ST ( ) Delete
Name: HICKMAN, DENISE
Address: LAND O'LAKES, FL
City-St-Zip: LAND O'LAKES, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: HICKMAN, ROBERT
Address: 1720 LAND O LAKES BLVD
City-St-Zip: LUTZ, FL 33549

Title: ST (X) Change ( ) Addition
Name: HICKMAN, DENISE
Address: 1720 LAND O LAKES BLVD
City-St-Zip: LUTZ, FL 33549

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: ROBERT HICKMAN D 04/27/2009
Electronic Signature of Signing Officer or Director — Date