2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# H55712

FILED Apr 02, 2002 8:00 AM Secretary of State

Entity Name: SUNCOAST INSULATORS AND ACOUSTICAL CONTRACTORS OF CITRUS COUNTY, INC.

Name and Address of Current Registered Agent: COTTEN, PATSY J. 3790 N. HIGHWAY 441 OCALA, FL 34475 US The above named entity submits this statement for the purpose of changing its registered office or registered agent in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date	Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
3790 N. HIGHWAY 441 P.O.BOX 1150 OCALA, FL 32678 FEI Number: 59-2520760 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desir Name and Address of Current Registered Agent: Name and Address of New Registered Agent: COTTEN, PATSY J. 3790 N. HIGHWAY 441 OCALA, FL 34475 US The above named entity submits this statement for the purpose of changing its registered office or registered agent in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date	P.O.BOX 1	150				
P.O.BOX.1150 OCALA, FL. 32678 FEI Number: 59-2520760 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desir Name and Address of Current Registered Agent: Name and Address of New Registered Agent: COTTEN, PATSY J. 3790 N. HIGHWAY 441 OCALA, FL. 34475 US The above named entity submits this statement for the purpose of changing its registered office or registered agent in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND D Title: S () Delete Title: () Change () Addition Name: Address: City-St-Zip: OCALA, FL City-St-Zip: OCALA, FL Title: V () Delete Title: () Change () Addition Name: Address: City-St-Zip: OCALA, FL 34475 City-St-Zip: OCALA, FL 34475 City-St-Zip: CRYSTAL RIVER, FL Title: V () Delete Title: () Change () Addition Name: Address: City-St-Zip: CRYSTAL RIVER, FL Title: () Change () Addition Name: Address: City-St-Zip: CRYSTAL RIVER, FL Title: () Change () Addition Name: Address: City-St-Zip: CRYSTAL RIVER, FL Title: () Change () Addition Name: Address: City-St-Zip: CRYSTAL RIVER, FL Title: () Change () Addition Name: Address: City-St-Zip: CRYSTAL RIVER, FL Title: () Change () Addition Name: Address: COTTEN, PATSY J Address: 1607 S.E. 18TH AVE. Address: 1607 S.E. 18TH AVE. Address:	Current Mailing Address:			New Mailing Addres	New Mailing Address:	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent: COTTEN, PATSY J. 3790 N. HIGHWAY 441 DCALA, FL 34475 US The above named entity submits this statement for the purpose of changing its registered office or registered agent in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date	P.O.BOX 1	150				
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3790 N. HIGHWAY 441 OCALA, FL 34475 US The above named entity submits this statement for the purpose of changing its registered office or registered agent in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent	Name and	Address of C	Current Registered Agent:	Name and Address	of New Registered Agent:	
in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date	3790 N. HÍC OCALA, FL	GHWAY 441 - 34475 US				
Electronic Signature of Registered Agent This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution (). DFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND D Fitle: S () Delete Title: () Change () Addition Name: Address: 247 NE 44TH AVE Address: 247 NE 45TH AV			submits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,	
This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND D Title: S () Delete	SIGNATUR	RE:				
Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND D Title: S () Delete Title: () Change () Addition Name: Address: 247 NE 44TH AVE Address: City-St-Zip: Title: V () Delete Title: () Change () Addition Name: Address: 3790 N HIGHWAY 44 Address: City-St-Zip: Title: V () Delete Title: () Change () Addition Name: Address: City-St-Zip: Title: V () Delete Title: () Change () Addition Name: Address: City-St-Zip: Title: V () Delete Title: () Change () Addition Name: Address: City-St-Zip: Title: V () Delete Title: () Change () Addition Name: Address: City-St-Zip: Title: PTD () Delete Title: () Change () Addition Name: Address: City-St-Zip: Title: PTD () Delete Name: COTTEN, PATSY J Name: Address: 1607 S.E. 18TH AVE. Address:		Electror	nic Signature of Registered Age	ent	Date	
DFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND D Title: S () Delete Title: () Change () Addition Name: Address: 247 NE 447H AVE Address: City-St-Zip: OCALA, FL Title: V () Delete Title: () Change () Addition Name: Address: 3790 N HIGHWAY 44 Address: City-St-Zip: OCALA, FL 34475 Title: V () Delete Title: () Change () Addition Name: Address: OCALA, FL 34475 Title: () Change () Addition Name: Address: OCALA, FL 34475 Title: () Change () Addition Name: Address: OCALA, FL 34475 Title: () Change () Addition Name: Address: OCALA, FL 34475 Title: () Change () Addition Name: Address: OCALA, FL 34475 Title: () Change () Addition Name: Address: OCALA, FL 34475 Title: () Change () Addition Name: Address: OCALA, FL 34475 Title: () Change () Addition Name: Address: OCALA, FL 34475 Title: () Change () Addition Name: Address: OCALA, FL 34475 Title: () Change () Addition Name: Name: () Change () Addition Name: Name: () Cotten, PATSY J Name: Address: Address: Address: Address: Address: Address:	•	-		uirement and elects to do so (X).		
Name: GOOCH, DAVID B Address: 247 NE 44TH AVE Address: City-St-Zip: OCALA, FL Fitle: V () Delete Name: GOOCH, STEPHEN N Address: 3790 N HIGHWAY 44 Address: OCALA, FL 34475 Fitle: V () Delete Title: () Change () Addition Name: Address: City-St-Zip: Fitle: V () Delete Title: () Change () Addition Name: Address: City-St-Zip: Fitle: V () Delete Title: () Change () Addition Name: BUGBEE, DAVID, Name: BUGBEE, DAVID, Address: 6044 TALLAHASSEE ROAD Address: 6044 TALLAHASSEE ROAD Address: City-St-Zip: Fitle: PTD () Delete Title: () Change () Addition Name: COTTEN, PATSY J Name: COTTEN, PATSY J Name: Address: 1607 S.E. 18TH AVE. Address: 1607 S.E. 18TH AVE.	·			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Name: GOOCH, STEPHEN N Address: 3790 N HIGHWAY 44 City-St-Zip: OCALA, FL 34475 City-St-Zip: OCALA, FL 34475 Title: V () Delete Title: () Change () Addition Name: BUGBEE, DAVID, Address: 6044 TALLAHASSEE ROAD Address: City-St-Zip: CRYSTAL RIVER, FL City-St-Zip: Title: PTD () Delete Title: PTD () Delete Name: COTTEN, PATSY J Address: 1607 S.E. 18TH AVE. Address: Address:	Name: Address:	GOOCH, DAVID 247 NE 44TH A	DВ	Name: Address:	() Change () Addition	
Name: BUGBEE, DAVID, Name: Address: 6044 TALLAHASSEE ROAD Address: City-St-Zip: CRYSTAL RIVER, FL City-St-Zip: Title: PTD () Delete Title: () Change () Addition Name: COTTEN, PATSY J Name: Address: 1607 S.E. 18TH AVE. Address:	Name: Address:	GOOCH, STEP 3790 N HIGHW	HEN N /AY 44	Name: Address:	() Change () Addition	
Name: COTTEN, PATSY J Address: 1607 S.E. 18TH AVE. Address: Address:	Name: Address:	BUGBEE, DAVI 6044 TALLAHA	D, SSEE ROAD	Name: Address:	() Change () Addition	
City-St-Zip: OCALA, FL 34478 City-St-Zip:	Name:	COTTEN, PATS	SY J H AVE.	Name: Address:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 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: PATSY J COTTEN PTD 04/02/2002