2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000054698

Entity Name: HILLIARD'S INSULATION, LLC

FILED Apr 16, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1010 SW 33RD AVE SUITE B

OCALA, FL 34474 US

Current Mailing Address: New Mailing Address:

1010 SW 33RD AVE SUITE B

OCALA, FL 34474 US

FEI Number: 20-2942096 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WARREN, JEFFERY L JR.
3141 S.W. 1ST AVENUE
586 SE 95 STREET
OCALA, FL 34474 US
OCALA, FL 34480 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: 04/16/2008

Electronic Signature of Registered Agent Date

ADDITIONS/CHANGES:

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 HILLIARD, HAROLD I
 Name:

 Address:
 4882 S.W. 1ST AVENUE
 Address:

 City-St-Zip:
 OCALA, FL 34474 US
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition Name: HILLIARD, SHARON G Name:

 Name:
 HILLIARD, SHARON G
 Name:

 Address:
 4882 S.W. 1ST AVENUE
 Address:

 City-St-Zip:
 OCALA, FL 34474 US
 City-St-Zip:

Title:MGRM () DeleteTitle:MGRM (X) Change () AdditionName:WARREN, JEFFERY L JR.Name:WARREN, JEFFERY L JR.Address:3141 S.W. 1ST AVENUEAddress:586 SE 95 STREET

 Address:
 3141 S.W. 1ST AVENUE
 Address:
 586 SE 95 STREET

 City-St-Zip:
 OCALA, FL 34474 US
 City-St-Zip:
 OCALA, FL 34480 US

Title: MGRM () Delete Title: MGRM (X) Change () Addition Name: WARREN, CHRISTOPHER T Name: WARREN, CHRISTOPHER T Address: 1719 SE 28TH ST Address: 2307 SE 14 STREET City-St-Zip: OCALA, FL 34471 US City-St-Zip: OCALA, FL 34471 US

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: SHARON I HILLIARD MGRM 04/16/2008