FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

FILED

Jan 27 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L81012

(1)

Mailing Address

ZEPHYRHILLS INSULATION INCORPORATED

33637 BETTS DR. Zepherhills fl 33543		33637 BETTS DR. ZEPHERHILLS FL 33543-5520							
Solot : Parti Himmy	TE WOOTH				3	3. Date Incorporated or Qualified 06/08/1990		of Last Re 9/1996	eport
2. Principal Pl	ace of Business	2a. Mailing Address			- 4	I. FEI Number	70/0		plied For
21		26	├ ─┐			59-3011230	Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.	·					\$8.75	
22		27	27			5. Certificate of Status Desired	L.)	Fee Re	
City & State		City & State	City & State			6. Election Campaign Financing		\$5.00	
23		28	<u> </u>			Trust Fund Contribution		Added t	
Zip	Country	Zip	Country			This corporation has liability for			. 199.032,
24	9. Name and Address of Curr	29 30				Florida Statutes Name and Address of New Re	Yes		
^UE		aur ugðisraiga Magir	81	Name		J. Malita Billi Addi 000 Or 11011 11	Bieralan wa	/OF 11	
Cherry, Judith ann 33637 Bets dr.									
	37 BETS DA. HERHILLS FL 33543		82 Street Addre			(P.O. Box Number is Not Accepta	ole)		1
(LL)	MEMNILLO FL 30070		83						
			84	City			FL	85 Zip (Code
11. Pursuant l	to the provisions of Sections 607.0	502 and 607.1508, Florida Statutes, t	he abov	e-named	corporati	ion submits this statement for the	nurnose of c	hanging it	s registered
office or registered agent, or both, in the State of Fiorida. 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.									
	11 to those series, series seemed to the en-	Senanti oil anaman an innanti ini							
SIGNATURE	Signarize hypric or printed harne of registers of	agent and life if applicable (NOTE: Rec	gistered Ago	ent signature	s required wh	nen reinstating)	DATE		
12.	OFFICERS A	AND DIRECTORS	13.		,	ADDITIONS/CHANGES TO OFFI			
TITLE	T	T □ DELETE 1.1			5	<u>ـ مست ا</u>		Change	X Addition
NAME			1.2 NAME		Rick	k Turver 625 Charles 4 hychills, Fl. 335	ر م د د		
STREET ADDRESS			1.3 STREET	ADDRESS	380	625 Charles ~	ve.		
CITY - ST - ZIP	DADE CITY FL		1.4 CITY - S	T-ZIP	Zep	hychills, +1.335	,7/ 0		
TITLE	VP	☐ DELETE ,	2.1 TITLE		'	,	L.	Change	Addition
, NAME			2.2 NAME						ļ
STREET ADDRESS				.3 STREET AODRESS				ļ	
CITY-ST-ZIP			2. 4 CITY-	ST-ZIP	 	· · · · · · · · · · · · · · · · · · ·		7 053000	Addition
TITLE	P AMERICA NAME (10 D	☐ DELETE	3.1 TITLE				L	Change	Addition
NAME	CHERRY, PHILLIP D.		3 2 NAME						
STREET ADDRESS	33637 BETTS DRIVE		3.3 STREET						
CITY+\$1-ZIP	ZEPHYRHILLS FL	≥ DELETE	3.4. CITY-	ST-ZIP	ļ			Change	Addition
TITLE	S CUEDDY HIDTH ANN	Nercir	4.1 TITLE				L.	_I∪imoinye	L. Abbition
NAME	CHERRY, JUDITH ANN		4. 2 NAME						
STREET ADDRESS	33637 BETTS DR. ZEPHYRHILLS FL		4.3 STREET						
CITY-ST-ZIP	ZEPATRAILLO FL	DELETE	4.4 CITY - S 5.1 TITLE	ST-ZIP	ļ		Т	Change	Addition
TITLE NAME	ı	First Decemb	5.1 NAME				_	_ Orange	/Nagaro
	ı		5.3 STREET	ADDRECC					
STREET ADDRESS	ı								
CITY-ST-7IP TITLE			5.4 CITY - S 6.1 TITLE	il-ZIF				Change	Addition
NAME			6.2 NAME				-		hand Alastonia
STREET AUDRESS	ı			ADDRESS					
	ı		64 CITY-S						
14. 1 do heret	ov certify that the information supp	olied with this filing does not qualify fo	r the exe	emption s	stated in S	Section 119.07(3)(i), Florida Statut	es. I further c	ertify that	the
Informatio	in indicated on this annual report of	or supplemental annual report is true or the receiver or trustee empowerer	and acci	urate and	d that my	signature shall have the same leg	al effect as if	f made un	der oath; that
		i, or on an attachment with an addres		JU10 17 110	ibport ac	Toquilou by Oliapias vor (Florida	Diameter, a.s.	I tomas corp.	anio

1, VP+ Judith ANN Cherry 1:13.97