

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000002090

FILED
Apr 25, 2005
Secretary of State

Entity Name: INSTALLATION DESIGN, INC. VOLUNTARY EMPLOYEE BENEFIT ASSOCIATION

Current Principal Place of Business:

1302 HARNESS HORSE LN.
#103
BRANDON, FL 33511

New Principal Place of Business:

3909 TURKEY OAK DRIVE
VALRICO, FL 33594

Current Mailing Address:

16765 FISHHAWK BLVD.
#323
LITHIA, FL 335473860

New Mailing Address:

FEI Number: 65-0533494 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KEMPF, KATHYRN
1302 HARNESS HORSE LN.
#102
BRANDON, FL 33511 US

Name and Address of New Registered Agent:

KEMPF, KATHYRN
3909 TURKEY OAK DRIVE
VALRICO, FL 33594 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:

04/25/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PAULISH, ROBERT
Address: 1302 HARNESS HORSE LN. #103
City-St-Zip: BRANDON, FL 33511

Title: D () Delete
Name: CHARNOTA, ROBERT
Address: 1302 HARNESS HORSE LN. #103
City-St-Zip: BRANDON, FL 33511

Title: D (X) Delete
Name: KEMPF, KATHRYN
Address: 1302 HARNESS HORSE LN. #103
City-St-Zip: BRANDON, FL 33511

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: PAULISH, ROBERT
Address: 3909 TURKEY OAK DRIVE
City-St-Zip: VALRICO, FL 33594

Title: D (X) Change () Addition
Name: KEMPF, KATHRYN
Address: 3909 TURKEY OAK DRIVE
City-St-Zip: VALRICO, FL 33594

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KATHRYN M. KEMPF

D

04/25/2005

Electronic Signature of Signing Officer or Director

Date