## **2008 FOR PROFIT CORPORATION** ANNUAL REPORT

## FILED Apr 07, 2008 8:00 am Secretary of State



1. Entity Name	MENT # P00906  TY PRODUCTS & INSULAT			04-07-2008 90023 016 ***150.00					
Principal Place 1097 COMMI E PETERSBUI		Maiting Address P O BOX 576 E PETERSBURG, PA 17	•						
2. Principal Pl	lace of Business - No P.O. Box #	3. Mailing Address	3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			Chg-P	CR2E00	34 (12/06)	
City & State	3	City & State		4. FEI Number 23-171			<u> </u>	plied For t Applicable	
Zip	Country Zip Cou		Coun	try	5. Certificate	of Status Desired		\$8.75 Addi Fee Required	
	6. Name and Address of Current	7. Name and Address of New Registered Agent							
CT CORPORATION SYSTEM				Name					
1200 S. PINE ISLAND ROAD PLANTATION, FL 33324				Street Address (P.O. Box Number is Not Acceptable)					
				City			FL	Zip Code	)
8. 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. I am familiar with, and accept the obligations of registered agent.									
SIGNATURE									
Signature, typod or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE									
FILE NOWI!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00  9. Election Campaign Financing Trust Fund Contribution.									
10.	OFFICERS AND	DIRECTORS	11.		ADDITIONS	CHANGES TO OFF	ICERS AND	DIRECTORS	
TITLE NAME	PD RAYNER, ROBERT M	Delete	TITL! NAM		nie I D	. Bofinge	<b>4</b>	☐ Change	✓ Addition
STREET ADDRESS	1097 COMMERCIAL AVE					mercial			
CITY+ST-ZIP	E PETERSBURG, PA 17520		CITY			sburg PA	175	20	
TITLE	AS	☐ Delete	TITE			ر دما		Change	Addition
name Street address	KOHANY, RONALD E 1097 COMMERCIAL AVE		NAM STRE	F-	ffrey P. 97 Com	mercials	tire		
CITY-ST-ZIP	E PETERSBURG, PA 17520			-ST-ZIP	Teters!		1752	lo.	
TITLE	VTS	☐ Delete	TITL	₹ <b>√</b> F	·	<del>-                                    </del>	1,440	☐ Change	Addition
NAME	DICARLO, BENJAMIN G		NAM	E M:	chaell. F	arley mercial t	. ص		
STREET ADDRESS CITY-ST-ZIP	1097 COMMERCIAL AVE.   EAST PETERSBURG, PA 1752	D		ET ADDRESS 1C	Peter	sburg PA	vし : 1 <b>7</b> 5:	20	
TITLE	V	Deiete	TITL	177	10101		, , , , , , ,	☐ Change	Addition
NAME	FEEHERY, MICHAEL C		NAM	'ص ل €	hn AB	ink			<del></del>
STREET ADDRESS	7210 N LOOP EAST		- 6	ET ADDRESS 10	5 Cuello	Court, W	n <del>d</del> zoz	- 	7
CITY-ST-ZIP	HOUSTON, TX 77028		TITL	175		ra Beach,	+-	3 2082 □ Change	Addition
TITLE NAME	MITCHELL, RICHARD M	☐ Delete	NAM		hn T. Di		<b>.</b>	C) Change	Z Addition
STREET ADDRESS	19710 58TH PLACE SOUTH					racklane			
CITY-ST-ZIP	KENT, WA 98032		-		eenwich	CT 068	<del></del>		·
TITLE NAME	P SCHATTGEN, CHARLES F	☐ Delete	TITL		Kirk 1	ddell		Change	Addition
STREET ADDRESS	1097 COMMERCIAL AVENUE			ET ADDRESS 17	5 RIVET	iddell Hill Road	_		
CITY-ST-ZIP	EAST PETERSBURG, PA 1752	0	CITY			17 AF J			
12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 19, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my contained the complemental report is true and accurate and that my contained the complemental report is true and accurate and that my contained the complemental report is true and accurate and that my contained in Chapter 19, Florida Statutes. I further certify that the information									

indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OF BRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: \_

1/1/08

Daytime Phone #

ATTACHMENT 40059785

SPECIALTY PRODUCTS & INSULATION CO.

FEIN 23-1713012 DOCUMENT #P0006 Georgia Secretary of State

**Additional Director** 

John O. Shirk 2850 Butter Road Lititz, PA 17543