

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000027771

FILED
Apr 08, 2010
Secretary of State

Entity Name: SOUTHEAST SPECIALTY INSULATION, INC.

Current Principal Place of Business:

4719 DISTRIBUTION DRIVE
TAMPA, FL 33805

New Principal Place of Business:

Current Mailing Address:

278 MYSTIC AVE.
2ND FLOOR, STE. 209
MEDFORD, MA 02155

New Mailing Address:

FEI Number: 59-3703790 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPT
Name: GRANARA, FRANK
Address: 4719 DISTRIBUTION DR
City-St-Zip: TAMPA, FL 33805

Title: SD
Name: SIROIS, ELLEN
Address: 46 BUCKSKIN PATH
City-St-Zip: PLYMOUTH, MA 02360

Title: PD
Name: MURPHY, LAWRENCE
Address: 88 SHEFFIELD
City-St-Zip: MELROSE, MA 02176

Title: VP
Name: O'NEIL, MARK
Address: 121 LONGWOOD AVE, #3A
City-St-Zip: BROOKLINE, MA 02146

I hereby 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 all other like empowered.

SIGNATURE: ELLEN J SIROIS

SEC

04/08/2010

Electronic Signature of Signing Officer or Director

Date