2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000074191

Entity Name: THERM-O-LITE CONSTRUCTION PRODUCTS, INC.

FILED Jul 19, 2006 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
801 SE 28TH STREET FORT LAUDERDALE, FL 33316				8308 TEMPLE TERRACE HWY TAMPA, FL 33637			
Current Mailing Address:			New Mailing Address:				
PO BOX 460130 FT LAUDERDALE, FL 33346				8308 TEMPLE TERRACE HWY TAMPA, FL 33637			
FEI Number:	45-0490543	FEI Number Applied For ()	FEI Num	nber Not Appli	cable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
ALAN C. (PETER) BRANDT, ESQ. 150 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US				JOHN C GRAVES JR. 8308 TEMPLE TERRACE HWY TAMPA, FL 33637 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.							
SIGNATUR	E: JOHN C G	RAVES JR				07/19/2006	
	Electronic	Signature of Registered Agent	t			Date	
Election Cam		(2)(b), F.S., the corporation did not re Trust Fund Contribution (). ORS:	eceive th	-		S TO OFFICERS AND DIRECTORS	S :
Title: Name: Address: City-St-Zip: Title:	D. TAFT GREEN, POST OFFICE B FORT LAUDERD	OX 460130		Title: Name: Address: City-St-Zip: Title:		() Change () Addition (X) Change () Addition	
Name: Address: City-St-Zip:	GORDON, RUSS POST OFFICE B FORT LAUDERD	OX 460130		Name: Address: City-St-Zip:	GRAVES, JOI 8308 TEMPLI TAMPA, FL 3	E TERRACE HWY	
Title: Name: Address: City-St-Zip:	D (X) I BROWN, T A POST OFFICE B FORT LAUDERD			Title: Name: Address: City-St-Zip:	(() Change () Addition	
Title: Name: Address: City-St-Zip:	D () E GORDON, RUSS 1216 TRAILWOO NEPTUNE BEAC	ELL B SR. DD DRIVE		Title: Name: Address: City-St-Zip:	GORDON, RU 1216 TRAILW	(X) Change () Addition JSSELL B SR. VOOD DRIVE EACH, FL 32266	
Title: Name: Address: City-St-Zip:	WILLIAMSON, R 1825 LA QUINTA			Title: Name: Address: City-St-Zip:	(()Change ()Addition	
Title: Name: Address: City-St-Zip:	D (X) I VAN HORN, KEN 5529 HANSEL AV ORLANDO, FL 3	/ENUE		Title: Name: Address: City-St-Zip:	(() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN C GRAVES JR PRE 07/19/2006