

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000095223

Entity Name: JACOBS INSULATIONS, INC.

FILED
Aug 20, 2004
Secretary of State

Current Principal Place of Business:

39015 CARDINAL AVE
ZEPHYRHILLS, FL 33542

New Principal Place of Business:

39039 CARDINAL AVE
ZEPHYRHILLS, FL 33542

Current Mailing Address:

39015 CARDINAL AVE
ZEPHYRHILLS, FL 33542

New Mailing Address:

39039 CARDINAL AVE
ZEPHYRHILLS, FL 33542

FEI Number: 14-1848210

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

JACOBS, JON
39015 CARDINAL AVE
ZEPHYRHILLS, FL 33542

Name and Address of New Registered Agent:

JACOBS, JON
39039 CARDINAL AVE
ZEPHYRHILLS, FL 33542

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: JON A. JACOBS

08/20/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: JACOBS, JON
Address: 39015 CARDINAL AVE
City-St-Zip: ZEPHYRHILLS, FL 33542

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: JACOBS, JON A
Address: 39039 CARDINAL AVE
City-St-Zip: ZEPHYRHILLS, FL 33542

Title: VP () Change (X) Addition
Name: JACOS, CHERYL A
Address: 39039 CARDINAL AVE.
City-St-Zip: ZEPHYRHILLS,, FL 33542

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

SIGNATURE: JON A. JACOBS

PRES

08/20/2004

Electronic Signature of Signing Officer or Director

Date