

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000097129

FILED
May 01, 2006
Secretary of State

Entity Name: INSUL8, INC.

Current Principal Place of Business:

133 INDUSTRIAL CT
FREEPORT, FL 32439

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 488
FREEPORT, FL 32439

New Mailing Address:

FEI Number: 11-3652646 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BELSER, WILLIAM L
635 FAIRWAY AVE.NE
FT. WALTON BEACH, FL 32547 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

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: P () Delete
Name: BELSER, WILLIAM L
Address: 635 FAIRWAY AVE.
City-St-Zip: FT. WALTON BCH., FL 32547

Title: V () Delete
Name: SCHISSLER, WILLIAM H
Address: P.O. BOX 288
City-St-Zip: FREEPORT, FL 32439

Title: V () Delete
Name: SCHISSLER, GEORGE D
Address: P.O. BOX 546
City-St-Zip: FREEPORT, FL 32439

Title: S () Delete
Name: SCHISSLER, FRANK M IV
Address: 619 PITTS BAYSHORE DRIVE
City-St-Zip: FREEPORT, FL 32439

Title: T () Delete
Name: ANDERSON, ANTHONY S
Address: 513 COUNTRY CLUB DR.
City-St-Zip: DEFUNIAK SPRINGS, FL 32435

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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 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: WILLIAM BELSER

P

05/01/2006

Electronic Signature of Signing Officer or Director

_____ Date