2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000015456

Entity Name: WHITE PELICAN INSULATION, INC.

FILED Apr 29, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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9529 S.R. 52

1265 KASS CIRCLE HUDSON, FL 346693002 SPRING HILL, FL 34606

Current Mailing Address: New Mailing Address:

9529 S.R. 52 1265 KASS CIRCLE HUDSON, FL 346693002 SPRING HILL, FL 34606

FEI Number: 06-1677921 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CENTELLA, THOMAS G CENTELLA, THOMAS G 1265 KASS CIRCLE 9529 S.R. 52

HUDSON, FL 346693002 US SPRING HILL, FL 34606 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.

SIGNATURE: 04/29/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

CENTELLA, THOMAS G CENTELLA, THOMAS G Name: Name: 9529 S.R. 52 1265 KASS CIRCLE Address: Address:

City-St-Zip: HUDSON, FL 346693002 City-St-Zip: SPRING HILL, FL 34606

Title: Title: () Delete (X) Change () Addition

CENTELLA, PAUL Name: CENTELLA, PAUL Name: 9529 S.R. 52 1265 KASS CIRCLE Address: Address: HUDSON, FL 346693002 SPRING HILL, FL 34606 City-St-Zip: City-St-Zip:

() Delete Title: Title: (X) Change () Addition

CENTELLA, RICK M Name: CENTELLA, RICK M Name: 9529 S.R. 52 1265 KASS CIRCLE Address: Address: City-St-Zip: HUDSON, FL 346693002 City-St-Zip: SPRING HILL, FL 34606

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: PAUL CENTELLA D 04/29/2005