

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000131055

Entity Name: S & M INSULATION INC.

FILED  
Jan 12, 2009  
Secretary of State

## Current Principal Place of Business:

1001 B CRANLEIGH  
DELAND, FL 32720

## New Principal Place of Business:

1001 B CRANLEIGH AVE.  
DELAND, FL 32720

## Current Mailing Address:

2692 AUDUBON AVENUE  
DELAND, FL 32720

## New Mailing Address:

FEI Number: 20-0389943

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SUTTON, WILLIE MAE  
2692 AUDUBON AVENUE  
DELAND, FL 32720 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: P, D ( ) Delete  
Name: SUTTON, WILLIE MAE  
Address: 2692 AUDUBON AVENUE  
City-St-Zip: DELAND, FL 32720

Title: S ( ) Delete  
Name: SUTTON, CAROL  
Address: 2692 AUDUBON AVE.  
City-St-Zip: DELAND, FL 32720

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: SUTTON, WILLIE MAE  
Address: 2692 AUDUBON AVENUE  
City-St-Zip: DELAND, FL 32720

Title: V.P. (X) Change ( ) Addition  
Name: SUTTON, HARVEY L  
Address: 2694 AUDUBON AVE.  
City-St-Zip: DELAND, FL 32720

Title: TR. ( ) Change (X) Addition  
Name: SUTTON, CAROL C  
Address: 2694 AUDUBON AVE.  
City-St-Zip: DELAND, FL 32720

I hereby certify that the information supplied with this filing does not qualify 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: WILLIE MAE SUTTON

PRES

01/12/2009

Electronic Signature of Signing Officer or Director

Date