2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000153635

3521 DR. LOVE ROAD

ORLANDO, FL 32810 US

Address: City-St-Zip: FILED Apr 30, 2008 Secretary of State

Entity Na	me: INSTALL	ATIONS PLUS OF CENTRAL	FLORIDA, INC.		
Current Principal Place of Business:			New Principal Plac	e of Business:	
1669 IMPE APOPKA,	ERIAL PALM D FL 32712	RIVE			
Current Mailing Address:			New Mailing Addre	ess:	
1669 IMPE APOPKA,	ERIAL PALM D FL 32712	RIVE			
FEI Number	: 42-1613237	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
ALL FLORIDA FIRM, INC 813 DELTONA BLVD STE A DELTONA, FL 32725 US			1669 IMPERIÁL PAL	POMMERING, FREDERICK L 1669 IMPERIAL PALM DRIVE APOPKA, FL 32712 US	
	named entity e of Florida.	submits this statement for the բ	ourpose of changing its registe	red office or registered agent, or both,	
SIGNATURE: FREDERICK L. POMMERING				04/30/2008	
Electronic Signature of Registered Agent			ent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PRES (POMMERING, 1669 IMPERIA APOPKA, FL 3	L PALM DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP (POORMAN, SO 309 HICKORY APOPKA, FL 3	COURT	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	VP (X SEXTON, RALI) Delete PH VP	Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: FREDERICK L. POMMERING PRES 04/30/2008