

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000040298

Entity Name: AFFOAMABLE INSULATION, INC.

FILED  
Jan 10, 2007  
Secretary of State

## Current Principal Place of Business:

291 SW SISTERS WELCOME RD.  
#102  
LAKE CITY, FL 32025 US

## New Principal Place of Business:

## Current Mailing Address:

291 SW SISTERS WELCOME RD.  
#102  
LAKE CITY, FL 32025 US

## New Mailing Address:

FEI Number: 20-4526992      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

CASE, ROBERT E JR.  
262 SW SIESTA PLACE  
LAKE CITY, FL 32025 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 ( ) Delete  
Name: LUNDE, BLAKE N II  
Address: 119 NW GRAY GLEN  
City-St-Zip: LAKE CITY, FL 32055 US

Title: VP ( ) Delete  
Name: NASH, HENRY S  
Address: 232 SW CANNON CT.  
City-St-Zip: LAKE CITY, FL 32024 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change ( ) Addition  
Name: LUNDE, STEPHANIE E  
Address: 119 NW GRAY GLEN  
City-St-Zip: LAKE CITY, FL 32055 US

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: STEPHANIE LUNDE

VP

01/10/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date