

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000044654

FILED
Mar 30, 2008
Secretary of State

Entity Name: ADVANCED FOAM INSULATION & COATINGS, INC.

Current Principal Place of Business:

232 STATE ROAD 16
ST. AUGUSTINE, FL 32084

New Principal Place of Business:

Current Mailing Address:

232 STATE ROAD 16
ST. AUGUSTINE, FL 32084

New Mailing Address:

FEI Number: 20-4610715

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANDERSON, LINDA J
382 HILL STREET
ST. AUGUSTINE, FL 32084 US

Name and Address of New Registered Agent:

ANDERSON, LINDA J
892 E RED HOUSE BRANCH ROAD
ST. AUGUSTINE, FL 32084 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: _____

Electronic Signature of Registered Agent

03/30/2008

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: ANDERSON, LINDA J
Address: 382 HILL STREET
City-St-Zip: ST. AUGUSTINE, FL 32084

Title: VPSD () Delete
Name: ANDERSON, JOHN S
Address: 382 HILL STREET
City-St-Zip: ST. AUGUSTINE, FL 32084

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: ANDERSON, LINDA J
Address: 892 E RED HOUSE BRANCH ROAD
City-St-Zip: ST. AUGUSTINE, FL 32084

Title: VPSD (X) Change () Addition
Name: ANDERSON, JOHN S
Address: 892 E RED HOUSE BRANCH ROAD
City-St-Zip: ST. AUGUSTINE, FL 32084

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: LINDA ANDERSON

P

03/30/2008

Electronic Signature of Signing Officer or Director

Date