2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000056482

Address:

City-St-Zip:

6645 BENTLEY LAKE RD

PINCKNEY, MI 48169

Entity Name: NOVI INSULATION FL INC.

FILED Jan 09, 2008 Secretary of State

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Current Principal Place of Business:	New Principal Place of Business:
9951 12TH WAY N. BLDG. 12-APT. 108 WINTERHAVEN, FL 33881	12003 49TH STREET NORTH SUITE 305 CLEARWATER, FL 33762
Current Mailing Address:	New Mailing Address:
23660 INDUSTRIAL PARK DRIVE 111 FARMINGTON HILLS, MI 48335 FEI Number: 56-2588287 FEI Number Applied For () FEI	23660 INDUSTRIAL PARK DRIVE SUITE 111 FARMINGTON HILLS, MI 48335 Number Not Applicable () Certificate of Status Desired ()
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
DONNELL, CLAYTON D 9951 12TH WAY N. BLDG. 12-APT. 108 SAINT PETERSBURG, FL 33716 US	
The above named entity submits this statement for the purpos in the State of Florida.	se of changing its registered office or registered agent, or both,
SIGNATURE: Electronic Signature of Registered Agent	Date
Election Campaign Financing Trust Fund Contribution ().	
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
Title: P () Delete Name: DONNELL, CLAYTON D Address: 9951 12TH WAY N., BLDG. 12-APT. 108 City-St-Zip: SAINT PETERSBURG, FL 33716	Title: PRES (X) Change () Addition Name: DONNELL, CLAYTON D Address: 9951 12TH WAY N., BLDG. 12-APT. 108 City-St-Zip: SAINT PETERSBURG, FL 33716

Title: () Delete Title: () Change () Addition STONE, STEPHEN S Name: Name: Address: 1225 JACOBY Address: MILFORD, MI 48380 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition SEC. Name: MROZEK, VICTOR N Name:

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: CLAYTON D. DONNELL PRES 01/09/2008