

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000007534

Entity Name: S & S INSTALLATIONS, INC.

FILED  
Aug 14, 2008  
Secretary of State

## Current Principal Place of Business:

6305 RICKER RD  
JACKSONVILLE, FL 32244

## New Principal Place of Business:

## Current Mailing Address:

6305 RICKER RD  
JACKSONVILLE, FL 32244

## New Mailing Address:

FEI Number: 20-8282337

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

O'BRIAN, ALICE L  
5640 TIMUQUANA RD SUITE 1  
JACKSONVILLE, FL 32210 US

## Name and Address of New Registered Agent:

JACKSONVILLE TAX & ACCOUNTING  
1566 BLANDING BLVD  
JACKSONVILLE, FL 32210 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: JACKSONVILLE TAX & ACCOUNTING INC

08/14/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: SULKALA, ANDREW  
Address: 6305 RICKER RD  
City-St-Zip: JACKSONVILLE, FL 32244

Title: V ( ) Delete  
Name: SULKALA, ANDREW  
Address: 6305 RICKER RD  
City-St-Zip: JACKSONVILLE, FL 32244

Title: S ( ) Delete  
Name: SIKES, NIKE  
Address: 6305 RICKER RD  
City-St-Zip: JACKSONVILLE, FL 32244

Title: T ( ) Delete  
Name: RICHMON, ED  
Address: 6305 RICKER RD  
City-St-Zip: JACKSONVILLE, FL 32244

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: ED RICHMON

T

08/14/2008

Electronic Signature of Signing Officer or Director

Date