

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000030877

FILED
Apr 30, 2008
Secretary of State

Entity Name: FLORIDA FOAM FIT INSULATORS, INC.

Current Principal Place of Business:

1767 LAKEWOOD RANCH BLVD
#278
BRADENTON, FL 34211 US

New Principal Place of Business:

Current Mailing Address:

1767 LAKEWOOD RANCH BLVD
#278
BRADENTON, FL 34211 US

New Mailing Address:

FEI Number: 65-0673005 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HENLEY, KIM A
801 S. JEFFERSON STREET
SARASOTA, FL 34234 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: SLADE, DAVID A
Address: 616 129TH ST NE
City-St-Zip: BRADENTON, FL 34212

Title: ST () Delete
Name: SLADE, MARY S
Address: 616 129TH ST NE
City-St-Zip: BRADENTON, FL 34212

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: MARY S SLADE

ST

04/30/2008

Electronic Signature of Signing Officer or Director

_____ Date