


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2004 8:00 am
Secretary of State

04-19-2004 90282 014 ***150.00

DOCUMENT # P97000066224	
1. Entity Name MECHANICAL INSULATION & TECHNOLOGIES INC.	

Principal Place of Business 852-29 SAXON BLVD. SUITE 108 ORANGE CITY, FL 32763	Mailing Address 852-29 SAXON BLVD. SUITE 108 ORANGE CITY, FL 32763
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2. Principal Place of Business 2578 Enterprise Rd Suite 108 Orange City FL 32763 USA	3. Mailing Address 2578 Enterprise Rd Suite 108 Orange City FL 32763 USA
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04142004 Chg-P CR2E034 (10/03)

4. FEI Number 59-3456652	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent SAWYER, RICHARD C 1178 N OLD MILL DRIVE DELTONA, FL 32725	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE P	<input type="checkbox"/> Delete	TITLE Change	<input type="checkbox"/> Addition
NAME SAWYER, RICHARD C		NAME 1178 N. Old Mill Drive	
STREET ADDRESS 2578 ENTERPRISE RD STE 108		STREET ADDRESS Deltona, FL 32725	
CITY-ST-ZIP ORANGE CITY, FL 32763		CITY-ST-ZIP 32738	
TITLE VP	<input type="checkbox"/> Delete	TITLE Change	<input type="checkbox"/> Addition
NAME MYERS, TODD M		NAME 1178 N. Old Mill Drive	
STREET ADDRESS 2578 ENTERPRISE RD STE 108		STREET ADDRESS Deltona, FL 32738	
CITY-ST-ZIP ORANGE CITY, FL 32763		CITY-ST-ZIP 32738	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Richard C Sawyer* **4-14-04 386-532-6973**
Signature and Typed or Printed Name of Signing Officer or Director Date Daytime Phone #