

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000093594

FILED
Mar 11, 2006
Secretary of State

Entity Name: SOUTHEAST INSULATORS SUPPLY, INC.

Current Principal Place of Business:

2628 SPRUCE CREEK BLVD
DAYTONA BEACH, FL 32128 US

New Principal Place of Business:

2628 SPRUCE CREEK BLVD
PORT ORANGE, FL 32128 US

Current Mailing Address:

2628 SPRUCE CREEK BLVD
DAYTONA BEACH, FL 32128 US

New Mailing Address:

2628 SPRUCE CREEK BLVD
PORT ORANGE, FL 32128 US

FEI Number: 58-2348453

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRUHLAR, THOMAS W
2628 SPRUCE CREEK BLVD.
DAYTONA BEACH, FL 32128 US

Name and Address of New Registered Agent:

TRUHLAR, THOMAS W
2628 SPRUCE CREEK BLVD.
PORT ORANGE, FL 32128 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: SARA J. TRUHLAR

03/11/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: TRUHLAR, THOMAS W
Address: 2628 SPRUCE CREEK BLVD
City-St-Zip: DAYTONA BEACH, FL 32128

Title: S () Delete
Name: TRUHLAR, SARA J
Address: 2628 SPRUCE CREEK BLVD
City-St-Zip: DAYTONA BEACH, FL 32128

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: TRUHLAR, THOMAS W
Address: 2628 SPRUCE CREEK BLVD
City-St-Zip: PORT ORANGE, FL 32128

Title: S (X) Change () Addition
Name: TRUHLAR, SARA J
Address: 2628 SPRUCE CREEK BLVD
City-St-Zip: PORT ORANGE, FL 32128

I hereby certify that the information supplied with this filing does not qualify for the 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: SARA J. TRUHLAR

VP

03/11/2006

Electronic Signature of Signing Officer or Director

Date