

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000003870

1. Entity Name

GENESIS INSULATION, INC.

**FILED**  
**Sep 18, 2000 8:00 am**  
**Secretary of State**

07-17-2000 90072 039 \*\*\*150.00

09-18-2000 90042 009 \*\*\*550.00

Principal Place of Business

Mailing Address

2800 LANTANA LAKES DR. W.  
 JACKSONVILLE FL 32246

2800 LANTANA LAKES DR. W.  
 JACKSONVILLE FL 32258-2233

2. Principal Place of Business

12602 OLD St. Augustine Rd

3. Mailing Address

same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Jacksonville, FL

City & State

Zip

Country

32258 USA

Zip

Country

4. FEI Number

59-3489839

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CROSSLEY, STEVEN F  
 2800 LANTANA LAKES DR. W.  
 JACKSONVILLE FL 32246

Name

Steven F. Crossley

Street Address (P.O. Box Number is Not Acceptable)

12602 OLD St. Augustine Rd

City

Jacksonville

FL

Zip Code

32258

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
 Tax filing requirement and elects to do so.  
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
 Trust Fund Contribution. ☐

**\$5.00** May Be  
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DPT ☐ Delete  
 NAME CROSSLEY, STEVEN F  
 STREET ADDRESS 2800 LANTANA LAKES DR. W.  
 CITY-ST-ZIP JACKSONVILLE FL 32246

TITLE President ☐ Change ☐ Addition  
 NAME Steven Crossley  
 STREET ADDRESS 12602 OLD St. Augustine Rd  
 CITY-ST-ZIP Jacksonville, FL 32258

TITLE VPS ☐ Delete  
 NAME CROSSLEY, BERNADETTE  
 STREET ADDRESS 2800 LANTANA LAKES DR. W.  
 CITY-ST-ZIP JACKSONVILLE FL 32246

TITLE Vice President ☐ Change ☐ Addition  
 NAME Bernadette Crossley  
 STREET ADDRESS 12602 OLD St. Augustine Rd  
 CITY-ST-ZIP Jacksonville, FL 32258

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
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TITLE ☐ Change ☐ Addition  
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 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Steven F. Crossley  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/12/00 904-292-1130  
 Date Daytime Phone #

CR2E034 (9/99)