

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P98000100396

FILED
Aug 09, 2007
Secretary of State**Entity Name:** SOUTHERN FOAM INSULATION, INC.**Current Principal Place of Business:**2593 CLARK STREET
UNIT 108
APOPKA, FL 32703 US**New Principal Place of Business:****Current Mailing Address:**2593 CLARK STREET
UNIT 108
APOPKA, FL 32703 US**New Mailing Address:****FEI Number:** 59-3544735**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**MARLOWE, MICHAEL L
1031 WEST MORSE BLVD
#105
WINTER PARK, FL 32789 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

OFFICERS AND DIRECTORS:**Title:** MR. () Delete
Name: BROWN, MICHAEL H
Address: 906 HYLAND SPRINGS DR.
City-St-Zip: OCOEE, FL 34761**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** MRS. () Change (X) Addition
Name: BROWN, TERESA L
Address: 906 HYLAND SPRINGS DR.
City-St-Zip: OCOEE, FL 34761

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: MICHAEL H. BROWN

MR

08/09/2007

Electronic Signature of Signing Officer or Director

Date