

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 499677

**Entity Name:** REEVES INSULATION, INC.

**Current Principal Place of Business:**

7028 DAVIS CREEK RD  
JACKSONVILLE, FL 32256

**Current Mailing Address:**

7028 DAVIS CREEK RD  
JACKSONVILLE, FL 32256 US

**FEI Number:** 59-1662915

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

LAROCCA, ROBERT A. SR.  
12846 BRADY RD  
JACKSONVILLE, FL 32223 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:** ROBERT A. LAROCCA, SR.

04/15/2013

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DCEO  
Name LAROCCA, ROBERT A. SR.  
Address 12846 BRADY RD  
City-State-Zip: JACKSONVILLE FL 32223

Title ST  
Name LAROCCA, JUDITH C.  
Address 12846 BRADY RD  
City-State-Zip: JACKSONVILLE FL 32223

Title P  
Name LAROCCA, ROBERT A. JR.  
Address 10605 QUAIL RIDGE DR  
City-State-Zip: PONTE VEDRA FL 32081

*I hereby 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 all other like empowered.*

**SIGNATURE:** ROBERT A. LAROCCA, SR.

CEO

04/15/2013

Electronic Signature of Signing Officer/Director Detail

Date