

1.) CORPORATION NAME:

LAND COAST INSULATION, INC.

DUE DATE: **7/31/2011**

SCC ID NO: **F1714395**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

AUTH IN VI

CT CORPORATION SYSTEM

4701 COX RD STE 301

GLEN ALLEN, VA 23060-6802

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

LA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 4017 SECOND ST.

CITY/ST/ZIP: NEW IBERIA, LA 70560-

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: ROBERT MICHAEL MORTON
TITLE: PRESIDENT
ADDRESS: 4017 SECOND ST.
CITY/ST/ZIP/CO: NEW IBERIA, LA 70560-

OFFICER

DIRECTOR

NAME: ROBIN M. MORTON
TITLE: SECRETARY
ADDRESS: 4017 SECOND ST.
CITY/ST/ZIP/CO: NEW IBERIA, LA 70560-

OFFICER

DIRECTOR

NAME: ROBERT MICHAEL MORTON
TITLE: CEO
ADDRESS: 4017 SECOND ST.
CITY/ST/ZIP/CO: NEW IBERIA, LA 70560-

OFFICER

DIRECTOR

NAME: ROBIN M. MORTON
TITLE: TREASURER
ADDRESS: 4017 SECOND ST.
CITY/ST/ZIP/CO: NEW IBERIA, LA 70560-

OFFICER

DIRECTOR

NAME: TIM S. MORTON
TITLE: EVP
ADDRESS: 4017 SECOND ST.
CITY/ST/ZIP/CO: NEW IBERIA, LA 70560-

OFFICER

DIRECTOR

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

<u>/s/ ROBERT MICHAEL MORTON</u> SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	<u>ROBERT MICHAEL MORTON, PRESIDENT</u> PRINTED NAME AND CORPORATE TITLE	<u>5/18/2011</u> DATE
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It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.