2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007
Secretary of State

DOCUMENT# P03000111201

Entity Name: C.Q. INSULATION, INC.

Current Principal Place of Business:

8806 VENTUR COVE
TEMPLE TERRACE, FL 33637

New Principal Place of Business:

8806 VENTURE COVE
TEMPLE TERRACE, FL 33637

Current Mailing Address:

8806 VENTUR COVE
TEMPLE TERRACE, FL 33637

New Mailing Address:

8806 VENTURE COVE
TEMPLE TERRACE, FL 33637

FEI Number: 20-0289994 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ERVIN, JOHN L
8806 VENTURE COVE
TAMPA, FL 33637 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: ERVIN, JOHN L
Address: 2518 W SIMMS
City-St-Zip: TAMPA, FL 33609

Title: D ( ) Delete
Name: WINN, GEORGE G
Address: 92 ADALIA AVE
City-St-Zip: TAMPA, FL 33606

Title: ST ( ) Delete
Name: ERVIN, KATHY A
Address: 2518 W SIMMS
City-St-Zip: TAMPA, FL 33609

Title: VD ( ) Delete
Name: FARRELL, SEAN
Address: 8806 VENTURE COVE
City-St-Zip: TAMPA, FL 33637

Title: D ( ) Delete
Name: FLUHORTY, THOMAS
Address: 8806 VONTURE COVE
City-St-Zip: TAMPA, FL 33637

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: FLUHARTY, THOMAS
Address: 8806 VENTURE COVE
City-St-Zip: TAMPA, FL 33637

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: JOHN ERVIN P 04/30/2007
Electronic Signature of Signing Officer or Director Date