2005 FOR PROFIT CORPORATION

ANNUAL REPORT								
DOCUMENT # F9400000525 1. Entity Name BMCA INSULATION PRODUCTS INC.				FILED 05 JAN 13 PH 3: 37				
Principal Place 1361 ALPS R WAYNE, NJ 0				SECHETARY OF STATE TALLAHASSI F. FLORIDA				
		· · · · · · · · · · · · · · · · · · ·						
DO NOT WRITE IN THIS SPACE			CE -	01102005	No Chg-P	CR2E034 (10/03)	05	
				4. FEI Numbe 22-327		, N	pplied For lot Applicable	
	6. Name and Address of Current Re	gistered Agent	<u> </u>	5. Certificate	of Status Desired	S8.75 Ac Fee Requir		
CORPORATION SERVICE COMPANY				DΩ	NOT W	DITE		
1201 HAYS ST TALLAHASSEE, FL 32301			DO NOT WRITE IN THIS SPACE					
				•••		7.00		
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. I am familiar with, and accept the obligations of registered agent.								
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE								
				.00 May Be led to Fees				
10.	OFFICERS AND DI	RECTORS						
NAME STREET ADDRESS CHY-ST-ZIP	CEOP COLLINS, WILLIAM W 1361 ALPS RD WAYNE, NJ 07470			100044707031				
TITLE NAME STREET ADORESS	EVPS WEINBERG, RICHARD A 1361 ALPS RD							
TITLE NAME STREET ADDRESS	WAYNE, NJ 07470 VPT MAITNER, JOHN M 1361 ALPS RD		-	DO	NOT W	Ditt		
CITY-ST-ZIP	WAYNE, NJ 07470 SVP			_	NOT W			
NAME STREET ADDRESS	YOSS, SUSAN 1361 ALPS RD			IN THIS SPACE				
CITY-ST-ZIP	WAYNE, NJ 07470							
NAME	SVPC REBELE, JOHN F							
STREET ADDRESS CITY-ST-ZIP	1361 ALPS RD WAYNE, NJ 07470]		•			
TITLE NAME	VP ASSAD, ROGER							
STREET ADDRESS CITY-ST-ZIP	1361 ALPS RD WAYNE, NJ 07470							

SIGNATURE:

Richard A. Weinberg EVP & Sec.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

1/11/05

Date

Daylime Phone #



ACCOUNT NO. : 072100000032

REFERENCE: 140321

4361308

: \$ 150.00 COST LIMIT

ORDER DATE: January 12, 2005

ORDER TIME : 10:36 AM

ORDER NO. : 140321-020

CUSTOMER NO: 4361308

CUSTOMER: Shelley Sorkin, L.a.

International Speciality

1361 Alps Rd.

Wayne, NJ 07470-3687

NAME:

BMCA INSULATION PRODUCTS

ANNUAL REPORT FILING

INC.

XX___ ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY ___ PLAIN STAMPED COPY

_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Darlene Ward - Ext. 2935

EXAMINER'S INITIALS: