2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 14, 2006
Secretary of State

DOCUMENT# F97000006020

Entity Name: CITY WIDE INSULATION OF MADISON, INC.

Current Principal Place of Business:

4313 TRIANGLE STREET
MCFARLAND, WI 53558

New Principal Place of Business:

Current Mailing Address:

4313 TRIANGLE STREET
MCFARLAND, WI 53558

New Mailing Address:

FEI Number: 39-1104383 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MURPHY, JEAN
1460 GEMINI BLVD #6
ORLANDO, FL 32837 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: CEO ( ) Delete
Name: MURPHY, GEORGE
Address: 68 CYPRESS VIEW DRIVE
City-St-Zip: NAPLES, FL 33962

Title: P ( ) Delete
Name: MURPHY, MARK
Address: 5882 TREELINE DRIVE
City-St-Zip: FITCHBURG, WI 53711

Title: VP ( ) Delete
Name: MURPHY, JOHN
Address: 1210 COUNTRY CLUB RD
City-St-Zip: CRYSTAL LAKE, IL 60014

Title: ST (X) Delete
Name: MURPHY, BRIAN
Address: 1319 FARWELL STREET
City-St-Zip: MCFARLAND, WI 53704

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: ST (X) Change ( ) Addition
Name: MURPHY, HARRIET
Address: 68 CYPRESS VIEW DRIVE
City-St-Zip: NAPLES, FL 33962

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

I hereby certify that the information supplied with this filing does not qualify for the 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: MARK MURPHY P 07/14/2006

Electronic Signature of Signing Officer or Director Date