# 2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED**
**Aug 21, 2006**
**Secretary of State**

DOCUMENT# P05000071187

**Entity Name:** THOMAS L. MURPHY SIDING, INC.

**Current Principal Place of Business:**

1312 BLUE MOON LN.
FRUITLAND PARK, FL 34731

**New Principal Place of Business:**

**Current Mailing Address:**

1312 BLUE MOON LN.
FRUITLAND PARK, FL 34731

**New Mailing Address:**

**FEI Number: 87-0745989** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

MURPHY, THOMAS L
1312 BLUE MOON LN.
FRUITLAND PARK, FL 34731 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

**OFFICERS AND DIRECTORS:**

Title: D/P ( ) Delete
Name: MURPHY, THOMAS L
Address: 1312 BLUE MOON LN.
City-St-Zip: FRUITLAND PARK, FL 34731

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: D/VP ( ) Change (X) Addition
Name: ST. CYR, RICHARD N
Address: 1405 BREABURY DRIVE
City-St-Zip: LEESBURG, FL 34748

Title: D/S/ ( ) Change (X) Addition
Name: MURPHY, KATHERINE A
Address: 1312 BLUE MOON LANE
City-St-Zip: FRUITLAND PARK, FL 34731

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: THOMAS L. MURPHY D/P 08/21/2006

Electronic Signature of Signing Officer or Director Date