2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000102236

Entity Name: GODDARD MECHANICAL INSULATION, INC.

FILED Apr 28, 2006 Secretary of State

Current Principal Place of Business:

134 WHISPERING WINDS RD.
PALATKA, FL 321778874

Current Mailing Address: New Mailing Address:

PO BOX 2547 PALATKA, FL 32178

FEI Number: 59-3483497 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

GODDARD, SHAWN D
4330 SUGARBERRY LANE
134 WHISPERING WINDS ROAD
TITUSVILLE, FL 32796 US
PALATKA, FL 32177 US

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: 04/28/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: V () Delete Title: () Change () Addition

 Name:
 GODDARD, MYRTON A
 Name:

 Address:
 134 WHISPERING WINDS RD.
 Address:

 City-St-Zip:
 PALATKA, FL 321778874
 City-St-Zip:

Title: P () Delete Title: () Change () Addition

 Name:
 GODDARD, SHAWN D
 Name:

 Address:
 134 WHISPERING WINDS RD.
 Address:

 City-St-Zip:
 PALATKA, FL 321778874
 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: SHAWN DALE GODDARD P 04/28/2006