2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000002014

Entity Name: OLDCASTLE MATERIALS, INC.

FILED Apr 20, 2010 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1055 THOMAS JEFFERSON STREET, NW 900 ASHWOOD PKWY STE 700

SUITE 400 ATLANTA, GA 30338 WASHINGTON, DC 20007

Current Mailing Address: New Mailing Address:

1055 THOMAS JEFFERSON STREET, NW 900 ASHWOOD PKWY STE 700

SUITE 400 ATLANTA, GA 30338 WASHINGTON, DC 20007

FEI Number: 95-3962933 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:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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.

iii tile State of Florida

SIGNATURE: Electronic Signature of Registered Agent Date

Electronic dignature of Registered Agent

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PCEO

Name: BLACK, DOUGLAS PCEODIR Address: 900 ASHWOOD PKWY STE 700

City-St-Zip: ATLANTA, GA 30338

Title: SVPT

Name: BROWN, CHARLIE VPSTCFO
Address: 900 ASHWOOD PKWY STE 700

City-St-Zip: ATLANTA, GA 30338

Title: DIR

Name: TOWE, MARK S DIR

Address: 900 ASHWOOD PKWY STE 700

City-St-Zip: ATLANTA, GA 30338

Title: DAS

Name: O'DRISCOLL, MICHAEL G DIRASEC Address: 900 ASHWOOD PKWY STE 700

City-St-Zip: ATLANTA, GA 30338

Title: DIR

Name: LEE, MYLES DIR

Address: 900 ASHWOOD PKWY STE 700

City-St-Zip: ATLANTA, GA 30338

Title: ASEC

Name: HICKMAN, GARY P ASEC Address: 900 ASHWOOD PKWY STE 700

City-St-Zip: ATLANTA, GA 30338

I hereby 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 all other like empowered.

SIGNATURE: MANDELINE HENDRICKS POA 04/20/2010