

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 22, 2006 8:00 am
Secretary of State

03-22-2006 90012 009 ***150.00

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1. Entity Name

JAMES HARDIE BUILDING PRODUCTS, INC.

Principal Place of Business

**23600 LA ALAMEDA, #100
MISSION VIEJO CA 92691**

Mailing Address

**23600 LA ALAMEDA, #100
MISSION VIEJO CA 92691**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E034 (10/05)

4. FEI Number **88-0351165**

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 consolidating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2006 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing **\$5.00 May Be
Trust Fund Contribution. ☐ Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME **P**
STREET ADDRESS **GRIES; LOUIS**
CITY-ST-ZIP **26300 LA ALAMEDA STE 100
MISSION VIEJO CA 92691**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME **T**
STREET ADDRESS **BARNET, SCOTT**
CITY-ST-ZIP **26300 LA ALAMEDA STE 100
MISSION VIEJO CA 92691**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Delete
NAME **D**
STREET ADDRESS **MERKLEY, DONALD**
CITY-ST-ZIP **26300 LA ALAMEDA STE 100
MISSION VIEJO CA 92691**

TITLE ☒ Change ☒ Addition
NAME **D**
STREET ADDRESS **Benjamin Butterfield**
CITY-ST-ZIP **26300 La Alameda, #100
Mission Viejo, CA 92691**

TITLE ☐ Delete
NAME **S**
STREET ADDRESS **LESTER, VIRGINIA G**
CITY-ST-ZIP **23600 LA ALAMEDA, #100
MISSION VIEJO CA 92691**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **RUSSELL, CHENU**
CITY-ST-ZIP **26300 LA ALMEDA STE 1000
MISSION VIEJO CA 92691**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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.

SIGNATURE:

Virginia G. Lester **Virginia G. Lester**

3/1/06

944-348-1800

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #