2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 258724

Entity Name: AJAX BUILDING CORPORATION

FILED Mar 31, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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1080 COMMERCE BLVD MIDWAY, FL 32343

Current Mailing Address: New Mailing Address:

1080 COMMERCE BLVD MIDWAY, FL 32343

FEI Number: 59-0969709 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:

BYRNE, WILLIAM P 109 COMMERCE BLVD OLDSMAR, FL 34677 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:

Date

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D () Delete Title: (X) Change () Addition BYRNE, WILLIAM P BYRNE, WILLIAM P Name: Name:

4449 ROANOZK WAY 109 COMMERCE BLVD Address: Address: City-St-Zip: PALM HARBOR, FL 34685 US City-St-Zip: OLDSMAR, FL 34677 US

Title: DΛ Title: DΛ (X) Change () Addition () Delete Name: SMITH, JOHN B II Name: SMITH, JOHN B II

1544 ISABEL COURT 1080 COMMERCE BLVD Address: Address: TALLAHASSEE, FL 32303 US MIDWAY, FL 32343 US City-St-Zip: City-St-Zip:

() Delete Title: (X) Change () Addition Title: S/T S/T LINDLAU, KENNETH LINDLAU, KENNETH Name: Name:

1421 COVEY RIDE W 1080 COMMERCE BLVD Address: Address: City-St-Zip: TALLAHASSEE, FL 32312 US City-St-Zip: MIDWAY, FL 32343 US

Title: AS/S () Delete Title: AS/S (X) Change () Addition GAMBLE, DEREK GAMBLE, DEREK Name: Name:

Address: 3098 SHAMROCK NORTH Address: 1080 COMMERCE BLVD City-St-Zip: TALLAHASSEE, FL 32309 US City-St-Zip: MIDWAY, FL 32343 US

Title: Title: (X) Change () Addition () Delete

SMITH, DOUGLAS C SMITH, DOUGLAS C Name: Name: 1536 ISABEL COURT Address: 1080 COMMERCE BLVD Address: City-St-Zip: TALLAHASSEE, FL 32303 City-St-Zip: MIDWAY, FL 32343

I hereby certify that the information supplied with this filing does not qualify 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: KENNETH LINDLAU S/T 03/31/2009