## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 261085** 

City-St-Zip:

Title:

Name:

Address: City-St-Zip: GAINESVILLE, FL

VELEY, DEBORAH H.,

6800 NW 22ND ST

GAINESVILLE, FL

() Delete

FILED Apr 18, 2006 Secretary of State

Entity Name: CENTRAL BUILDER SUPPLIES OF GAINESVILLE, INC.

**Current Principal Place of Business: New Principal Place of Business:** 6800 NORTHWEST 22ND STREET GAINESVILLE, FL 326531614 US **Current Mailing Address: New Mailing Address:** 6800 NORTHWEST 22ND STREET GAINESVILLE, FL 326531614 US FEI Number: 59-0975961 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: VELEY, CAJR 6800 NW 22ND STREET GAINESVILLE, FL 32653 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: (X) Change ( ) Addition VELEY, C A JR, Name: Name: VELEY, C A JR, 6800 NW 22ND ST 6800 NW 22ND ST Address: Address: GAINESVILLE, FL 32653 City-St-Zip: GAINESVILLE, FL City-St-Zip: Title: Title: () Delete (X) Change ( ) Addition MCMONIGLE, DEBRA Name: Name: MCMONIGLE, DEBRA V 6800 NW 22ND ST 6800 NW 22ND ST Address: Address: GAINESVILLE, FL GAINESVILLE, FL 32653 City-St-Zip: City-St-Zip: ( ) Delete Title: STD Title: STD (X) Change ( ) Addition VELEY, A.T. VELEY, ARENA T Name: Name: 6800 NW 22ND ST 6800 NW 22ND ST Address: Address: City-St-Zip: GAINESVILLE, FL City-St-Zip: GAINESVILLE, FL 32653 Title: ( ) Delete Title: (X) Change ( ) Addition VELEY, C A III, VELEY, C A III, Name: Name: Address: 6800 NW 22ND ST Address: 6800 NW 22ND ST

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.

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

GAINESVILLE, FL 32653

VELEY, DEBORAH H.,

GAINESVILLE, FL 32653

6800 NW 22ND ST

(X) Change ( ) Addition

SIGNATURE: DEBRA V MCMONIGLE D 04/18/2006