## 2002 UNIFORM BUSINESS REPORT (UBR) FILED May 27, 2002 8:00 am Secretary of State DOCUMENT # 819659 1. Entity Name UNITED STATES GYPSUM COMPANY 05-27-2002 90320 038 \*\*\*150.00 Principal Place of Business Mailing Address 125 SOUTH FRANKUN ST 125 SOUTH FRANKLIN ST CHICAGO IL 60606 CHICAGO IL 60606 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 36-1898410 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 City Zip Code FL 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 SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing Tax filing requirement and elects to do so. \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State Added to Fees 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE PGEO-JAMES S. METCACF Change Delete CR2E034 (9/01) Addition **BOSOWSKI, EDWARD** NAME 125 S. FRANKLIN ST. 125 S. FRANKLIN ST. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4 CHICAGO IL 60606 CHICAGO IL 60606 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME LOWES, D. RICK NAME STREET ADDRESS 125 S. FRANKLIN ST. STREET ADDRESS CITY-ST-ZIP CHICAGO IL 60606-4678 CITY-ST-7IP Delete TITLE TITLE VICE PRES. ☐ Change Addition GOOSSEN, DEAN H. --NAME\* NAME ITTERIC SCHAAL. STREET ADDRESS 125 S. FRANKLIN ST. 125 S. FRANKLIN ST. STREET ADDRESS CITY-ST-ZIP CHICAGO IL CITY-ST-ZIP CHICAGO IL 60606 TITLE ☐ Delete TITLE Change ☐ Addition BELZ. RAYMOND T. NAME NAME 125 S. FRANKLIN ST. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHICAGO IL CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition FLEMING, RICHARD H NAME NAME STREET ADDRESS 125 S FRANLKIN ST STREET ADDRESS CITY-ST-ZIP CHICAGO FK 60606 CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS City-St-7iP 13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

Daytime Phone #

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR