

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000005632

FILED  
Apr 09, 2012  
Secretary of State

Entity Name: CERTAINTEED GYPSUM, INC.

## Current Principal Place of Business:

4300 WEST CYPRESS STREET  
SUITE 500  
TAMPA, FL 33607

## New Principal Place of Business:

4300 WEST CYPRESS STREET  
SUITE 500  
TAMPA, FL 336074157 US

## Current Mailing Address:

4300 WEST CYPRESS STREET  
SUITE 500  
TAMPA, FL 33607

## New Mailing Address:

4300 WEST CYPRESS STREET  
SUITE 500  
TAMPA, FL 336074157 US

FEI Number: 04-3718860

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

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

## Name and Address of New Registered Agent:

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

## OFFICERS AND DIRECTORS:

Title: PDC  
Name: ENGELHARDT, DAVID  
Address: 4300 W. CYPRESS ST., SUITE 500  
City-St-Zip: TAMPA, FL 33607 US

Title: SEC  
Name: RAYBURN, D. LAWRENCE  
Address: 4300 W. CYPRESS ST., SUITE 500  
City-St-Zip: TAMPA, FL 33607 US

Title: TREA  
Name: SWEENEY III, JOHN  
Address: 750 E. SWEDESFORD RD.  
City-St-Zip: VALLEY FORGE, PA 19482 US

Title: VPD  
Name: CAMPBELL, KEITH C  
Address: 4300 WEST CYPRESS STREET, SUITE 500  
City-St-Zip: TAMPA, FL 33607 US

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: RUSSELL KOPP

\_\_\_\_\_  
POA

\_\_\_\_\_  
04/09/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date