

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F02630

FILED
Jul 11, 2007
Secretary of State

Entity Name: HARWOOD BRICK DISTRIBUTORS, INC.

Current Principal Place of Business:

3302 N.E. 2ND STREET
GAINESVILLE, FL 32609

New Principal Place of Business:

Current Mailing Address:

3302 N.E. 2ND STREET
GAINESVILLE, FL 32609

New Mailing Address:

375 NORTHRIDGE ROAD
SUITE 350
ATLANTA, GA 30350

FEI Number: 59-2043796

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TOVKACH, WALTER M
5011 NW 8TH AVE
GAINESVILLE, FL 32605 US

Name and Address of New Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: DALE MORRIS FOR CT CORPORATION SYSTEM

07/11/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HARWOOD, THOMAS V SR
Address: 3302 NE 2ND ST
City-St-Zip: GAINESVILLE, FL

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: CONROY, TOM
Address: 375 NORTHRIDGE ROAD, SUITE 350
City-St-Zip: ATLANTA, GA 30350

Title: CFO () Change (X) Addition
Name: CRABTREE, IAN
Address: 375 NORTHRIDGE ROAD, SUITE 350
City-St-Zip: ATLANTA, GA 30350

Title: S () Change (X) Addition
Name: ELLIOTT, KELLY A
Address: 375 NORTHRIDGE ROAD, SUITE 350
City-St-Zip: ATLANTA, GA 30350

Title: AS () Change (X) Addition
Name: MAJHER, DAVID
Address: 375 NORTHRIDGE ROAD, SUITE 350
City-St-Zip: ATLANTA, GA 30350

Title: AS () Change (X) Addition
Name: HICKMAN, GARY P
Address: 375 NORTHRIDGE ROAD, SUITE 350
City-St-Zip: ATLANTA, GA 30350

Title: DAS () Change (X) Addition
Name: O'DRISCOLL, MICHAEL G
Address: 375 NORTHRIDGE ROAD, SUITE 350
City-St-Zip: ATLANTA, GA 30350

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: GARY P. HICKMAN

AS

07/11/2007

Electronic Signature of Signing Officer or Director

Date