2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000003553

Entity Name: ROOF DEPOT ORLAND BUILDING SUPPLY INC

FILED Apr 27, 2006 Secretary of State

Current Principal Place of Business: 1860 E. 28TH STREET MINNEAPOLIS, MN 55407 Current Mailing Address: 1860 E. 28TH STREET MINNEAPOLIS, MN 55407				New Principal Place of Business: New Mailing Address:	
FEI Number: 41-1588258 FEI Number Applied For () FE		El Number Not Appli	icable () Certificate of Status Desired ()		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
C T 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:					
Electronic Signature of Registered Agent Date					
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:					
Title: Name: Address: City-St-Zip:		Delete ENE R ARLES STREET	Title: Name: Address: City-St-Zip:	CT (X) Change () Addition BERWALD, EUGENE R 2440 NORTH CHARLES STREET NORTH ST. PAUL, MN 55109	
Title: Name: Address: City-St-Zip:	VCS ()[BERNARD, KENI 2440 NORTH CH NORTH ST. PAUI	ARLES STREET	Title: Name: Address: City-St-Zip:	VCS (X) Change () Addition BERWALD, KENNETH M 2440 NORTH CHARLES STREET NORTH ST. PAUL, MN 55109	
Title: Name: Address: City-St-Zip:	DP () [MCGRATH, MICH 1387 EAST COP MAPLEWOOD, M	E AVENUE	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	D ()[BERNARD, WILL 2440 NORTH CH NORTH ST. PAUI	ARLES STREET	Title: Name: Address: City-St-Zip:	D (X) Change () Addition BERWALD, WILLIAM E 2440 NORTH CHARLES STREET NORTH ST. PAUL, MN 55109	
Title: Name: Address: City-St-Zip:	D () [LEWIS, DAN 15525 32N AVEN PLYMOUTH, MN		Title: Name: Address: City-St-Zip:	()Change ()Addition	

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.

SIGNATURE: MICHAEL G. MCGRATH DP 04/27/2006