

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000003563

FILED  
Apr 08, 2009  
Secretary of State

Entity Name: CUSTOM BUILDING PRODUCTS, INC.

## Current Principal Place of Business:

13001 SEAL BEACH BLVD., SECOND FLOOR  
SEAL BEACH, CA 90740

## New Principal Place of Business:

## Current Mailing Address:

13001 SEAL BEACH BLVD., SECOND FLOOR  
SEAL BEACH, CA 90740

## New Mailing Address:

FEI Number: 95-2400847

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DRIVE, SUITE 4  
WESTON, FL 33331 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: PECK, THOMAS R II  
Address: 13001 SEAL BEACH BLVD., SECOND FLOOR  
City-St-Zip: SEAL BEACH, CA 90740

Title: EP ( ) Delete  
Name: MCMULLEN, JOHN  
Address: 13001 SEAL BCH BLVD  
City-St-Zip: SEAL BEACH, CA 90740

Title: VP ( ) Delete  
Name: WEBER, ROLAND JR  
Address: 13001 SEAL BCH BLVD  
City-St-Zip: SEAL BEACH, CA 90740

Title: VPFS ( ) Delete  
Name: SHAW, MICHAEL D  
Address: 13001 SEAL BCH BLVD  
City-St-Zip: SEAL BEACH, CA 90740

Title: CFOV ( ) Delete  
Name: BLOOME, CHARLES  
Address: 13001 SEAL BCH BLVD  
City-St-Zip: SEAL BEACH, CA 90740

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: MICHAEL D SHAW

VPFS

04/08/2009

Electronic Signature of Signing Officer or Director

Date