FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F67050

(7)

BUILDING MATERIALS OF WEST FLORIDA, INC.

FILED May 13 1998 8:00am Secretary of State



3008 HWY. 85-A SOUTH (CANTONMENT, FL.) P.O. BOX 7006 PENSACOLA FL 32534-0006 2. Principal Place of Business 21 Suite, Apt. #, etc.		3008 HWY. 95-A SOUTH (CANTONMENT. FL.) P.O. BOX 7006 PENSACOLA FL 32534-0006 2a. Mailing Address 26 Suite, Apt. #, etc.)	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/15/1982 4. FEI Number Applied For 59-2233733 Not Applicable 5. Certificate of Status Desired \$8.75 Additional Fee Required			
City & Stat	9	City & State				6. Election Campaign Financing \$5.00 May Be			
Zip Zip	Country 25 9. Name and Address of Current	Zip Country 29 30 Registered Agent				Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent			
CAMPBELL, C. R.				Na	me	-			
	891 OLD DAIRY LANE		82 Street A		eet Addres	ss (P.O. Box Number is Not Acceptable)			
PEI	NSACOLA FL 32534		83				_		
			63		,	·			
	f.		84	Cit	У	FL	85 Z	ip Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE									
Signature: typed or printed name of registrated agout and tire if applicable. (NOTE Reg. 12. OFFICERS AND DIRECTORS				egistered Agent signature require		when reinstaling) DATE ADDITIONS/CHANGES TO OFFICERS AND	DIDECT	ODC IN 10	
TITLE	PD	DELETE	1.1 TITLE			ADDITIONS/CHANGES TO OFFICERS AND	Chang		
NAME	CAMPBELL, C. R.		1.2 NAME						
STREET ADDRESS 10391 OLD DAIRY LANE			1,3 STREET ADDRESS		ESS				
CITY-ST-ZIP	PENSACOLA FL		1.4 CITY - 1	ST-ZIP					
TITLE	D	☐ DELETE	2.1 TITLE				Chang	e 🔲 Addition	
NAME	CAMPBELL, ELEANOR FAYE 10391 OLD DAIRY LANE		2.2 NAME						
STREET ADDRESS	PENSACOLA FL		2.3 STREET ADE		1				
CITY-ST-ZIP TITLE	2.7		_	2. 4 CITY-\$1-ZIP 3.1 TITLE			Chang	e Addition	
NAME	CAMPBELL, CLEVELAND JR.	C vecie	3.2 NAME				chang	S C Addition	
STREET ADDRESS	10390 OLD DAIRY LANE		3.3 STREET	ADDRI	ess i				
CITY-ST-ZIP	PE NSACOLA FL			3.4. CITY-ST-ZIP					
TITLE	8	DĒLĒTĒ	4.1 TITLE				Chang	e Addition	
NAME	WOOD, TRUDY MARIE	4.2		4 2 NAME					
STREET ADDRESS			4.3 STREET ADD		:SS				
CITY-\$T-ZIP	PENSACOLA FL		4.4 CITY - 5	ST-ZIP					
TITLE	VP CAMPBELL, BILLY RAY	☐ DELETE	5.1 TITLE				Change	e 🔲 Addition	
NAME OTOTET ADDOCCO	1340 BRICKTON RD.		5.2 NAME						
STREET ADDRESS CITY-ST-ZIP	CANTONMENT FL		5.3 STREET		.55				
TITLE		☐ DELETE	5.4 CITY - 5 6.1 TITLE	51 - ZIF			Change	e Addition	
NAME			6.2 NAME		1				
STREET ADDRESS			6.3 STREET		iss				
CITY-ST-ZIP			6.4 CITY - S	1-ZIP					
14. Thereby 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an altachment with an address.									