

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **F94000000525**

1. Entity Name

BMCA INSULATION PRODUCTS INC.



APPROVED
AND
FILED

03 JUL 10 PM 9:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

**1361 ALPS RD
WAYNE NJ 07470**

Mailing Address

**1361 ALPS RD
WAYNE NJ 07470**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

22-3275477

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS ST
TALLAHASSEE FL 32301**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00

**After September 10, 2003 Fee will be \$750.00
Make Check Payable to Florida Department of State**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **PCEO** ☐ Delete
NAME **HEYMAN, SAMUEL**
STREET ADDRESS **1361 ALPS RD**
CITY-ST-ZIP **WAYNE NJ 07470**

TITLE **VCFO** ☐ Delete
NAME **REBELE, JOHN F**
STREET ADDRESS **1361 ALPS RD**
CITY-ST-ZIP **WAYNE NJ 07470**

TITLE **PCEO** ☐ Delete
NAME **COLLINS, WILLIAM W.**
STREET ADDRESS **1361 ALPS RD**
CITY-ST-ZIP **WAYNE NJ 07470**

TITLE **VPT** ☐ Delete
NAME **YOSS, SUSAN**
STREET ADDRESS **1361 ALPS RD**
CITY-ST-ZIP **WAYNE NJ 07470**

TITLE **VPS** ☐ Delete
NAME **WEINBERG, RICHARD A**
STREET ADDRESS **1361 ALPS RD**
CITY-ST-ZIP **WAYNE NJ 07470**

TITLE **SVPD** ☐ Delete
NAME **HARRISON, DAVID A**
STREET ADDRESS **1361 ALPS RD**
CITY-ST-ZIP **WAYNE NJ 07470**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP **500021464345**

TITLE ☒ Change ☐ Addition
NAME **Treasurer**
STREET ADDRESS **John M. Maitner**
CITY-ST-ZIP **1361 Alps Road**
Wayne, NJ 07470

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Richard A. Weinberg 7/8/03

Exec. VP & Sec.

Date

Daytime Phone #

CR2E034 (4/03)



282

ACCOUNT NO. : 072100000032
REFERENCE : 162153 5020218
AUTHORIZATION : *Patricia Pigato*
COST LIMIT : \$ 550.00

ORDER DATE : July 9, 2003
ORDER TIME : 1:19 PM
ORDER NO. : 162153-005
CUSTOMER NO: 5020218
CUSTOMER: Shelley Sorkin
Building Material Corporation
1361 Alps Road
Wayne, NJ 07470-3687

RECEIVED
03 JUL 10 PM 2:46
DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

ANNUAL REPORT FILING

NAME: BMCA INSULATION PRODUCTS INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Norma Hull - Ext. 1115

EXAMINER'S INITIALS: _____