2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 11, 2008
Secretary of State

DOCUMENT# F96000003780

Entity Name: GUARDIAN BUILDING PRODUCTS DISTRIBUTION, INC.

Current Principal Place of Business:

979 BATESVILLE ROAD
GREER, SC 29651

New Principal Place of Business:

Current Mailing Address:

979 BATESVILLE ROAD
GREER, SC 29651

New Mailing Address:

FEI Number: 58-1968171 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

INCORPORATING SERVICES, LTD
1540 GLENWAY DRIVE
TALLAHASSEE, FL 32301 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: D ( ) Delete
Name: FAULKNER, DUANE
Address: 979 BATESVILLE RD.
City-St-Zip: GREER, SC 29651

Title: VP ( ) Delete
Name: HAMILTON, CARA
Address: 979 BATESVILLE RD.
City-St-Zip: GREER, SC 29651

Title: S ( ) Delete
Name: GORLIN, ROBERT H
Address: 2300 HARMON RD.
City-St-Zip: AUBURN HILLS, MI 48326

Title: T ( ) Delete
Name: WAICHUNAS, E. ANN
Address: 2300 HARMON RD.
City-St-Zip: AUBURN HILLS, MI 48326

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIRE (X) Change ( ) Addition
Name: FAULKNER, DUANE
Address: 979 BATESVILLE RD.
City-St-Zip: GREER, SC 29651

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: ASST ( ) Change (X) Addition
Name: WELLS, JOSEPH A A. TREA
Address: 979 BATESVILLE RD
City-St-Zip: GREER, SC 29651

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: JOSEPH A WELLS ASST 01/11/2008

Electronic Signature of Signing Officer or Director Date