## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## **DOCUMENT #**

Principal Place of Business

SIGNATURE:

F98000001670

Mailing Address

1. Entity Name

BUILDERS FIRSTSOURCE - ATLANTIC GROUP, INC.



FILED Apr 01, 2003 8:00 am Secretary of State

04-01-2003 90045 041 \*\*\*150.00

5330 SPECTRI	UM DRIVE		5330 SPECTRUM DRIVE SUITE L										
FREDERICK M	D 21703		FREDERICK MD 21703					  1 <b>01</b>     <b>10</b>	. <b>1</b>	<b>i e</b> i i i i i i i i i i i i i i i i i i			
2. Principal Place of Business			3. Mailing Address					I) <b>EU</b> IH <b>B</b> BI	D1 17858 D1151 18				
Suite, Apt. #, etc.			Suite, Apt. #, etc.				<b>—</b>						
osno, r pa			- Cano, r.p.: 11, oto.				CHECK HERE IF MAKING CHANGES						
City & Stat	е		City & State				4. FEI Number 52-2080519		Ap	plied For			
<del></del>						JZ 20003 18			t Applicable				
Zip	Zip Country		Zip	try	5. Certificate of Status Desired See Required								
6. Name and Address of Current Registered Agent						7. Name and Address of New Registered Agent							
						Name							
C T CORP		Stroot Addross (			2. Poy Number is Not Assentable)	•							
1200 SOUTH PINE ISLAND ROAD					Street Address (P.O. Box Number is Not Acceptable)								
PLANTATI	ON FL 3332	<u>24</u>											
Çe .					City Zip Code					9			
· · · · · · · · · · · · · · · · · · ·					•			FL					
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													
the obligations of registered agent.													
SIGNATURE (AND Experience of a picture of a													
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE													
FILE NOW!!! FEE IS \$150.00							9. Election Campaign Financ	ing	\$5.0	<b>0</b> мау Ве			
After May 1, 2003 Fee will be \$550.00  Make Check Payable to Florida Department of State							Trust Fund Contribution.			to Fees			
1 m	Trayable to	OFFICERS AND I		11.		· · · · · · · · · · · · · · · · · · ·	ADDITIONS/CHANGES TO OFFICER	SC AND I	DIBECTOR	2 IN 11			
TITLE	CEO	· i .	□ Delete	TITL		A5	ADDITIONS/OFFANGES TO OFFICE		☐ Change	Addition			
NAME	SHERMAN		☐ Delete	NAM		1 non 0	broderick		Onlinge	JES / NOCILION			
STREET ADDRESS					ET ADDRESS	5330	spectrum or. Ste L						
CITY-ST-ZIP	DALLAS T	X 75201		CITY	-ST-ZIP	Frede	rick, MD 21703						
TITLE	VS		☐ Delete	TITL	Ē	VIT	/AS		☐ Change	<b>⊠</b> Addition			
NAME		an, donald f		NAM	E	char	ries L. Horn						
STREET ADDRESS 2001 BRYAN STREET SUITE 1600			)	ET ADDRESS	2001 Bryan St. Ste. 1600								
CITY-ST-ZIP	DALLAS T				-ST-ZIP		S, TX 75201			New			
TITLE	VAS -	. ~~	Delete	- TITLE NAM		VAS	ey A. Maunz		☐ Change	Addition			
NAME STREET ADDRESS	O'MEARA,	AN STREET SUITE 1600	1		ET ADDRESS	Bradi	spectrum or Ste L						
CITY-ST-ZIP	DALLAS T				-ST-ZIP		enck MD 21703						
TITLE	D		☐ Delete	TITLE		11116	· · · · · · · · · · · · · · · · · · ·		☐ Change	Addition			
NAME	LEVY, PAU	IL S		NAM		Talle	au A. Wier		_ ,				
STREET ADDRESS		GTON AVE STE 3350		STRE	ET ADORESS	2001	Bryan St. Ste 1600						
CITY-ST-ZIP	NEW YOR	K NY 10017		CITY	-ST-ZIP	Dallo	xs, TX 75201						
TITLE	D		☐ Delete	TITLE		AS	. Disking -		☐ Change	Addition			
NAME	YING, DAV			NAM	-	DEPOL	an Dickinson			1			
STREET ADDRESS		GTON AVE STE 3350			ET ADDRESS		Bryan St. Ste & 1600						
CITY-ST-ZIP		K NY 10017			-ST-ZIP	Dalla P	s, TX 15201			Addition 1			
TITLE NAME	D Milgrim, 1	RRETT	Delete	TITLE		Do (14)	as Schweinhart		Change	Addition			
STREET ADDRESS		GTON AVE STE 3350			ET ADDRESS	5330	spectrum Or. STE L						
CITY-ST-ZIP		K NY 10017			-ST-ZIP	Frede	unck, MD 21703						
						ted in Secti	ion 119.07(3)(i), Florida Statutes. I furt						
of the cor	poration or th	ne receiver or trustee empo	wered to execute this repor	t as requir	ture shall h red by Cha	ave the sar ipter 607, F	me legal effect as if made under oath Florida Statutes; and that my name ap	that I ar pears in	n an officer i Block 10 or	or director Block 11 if			
changed.	or on an atta	ichment with an address, w	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.										