

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F99000002737

FILED  
Jan 13, 2003  
Secretary of State

Entity Name: MANER BUILDING SUPPLY COMPANY

## Current Principal Place of Business:

PO BOX 204598  
AUGUSTA, GA 30917

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 204598  
AUGUSTA, GA 30917

## New Mailing Address:

FEI Number: 58-0585932

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: BROOME, JIM  
Address: 852 LAKE ROYAL DRIVE  
City-St-Zip: GROVETOWN, GA 30813

Title: V ( ) Delete  
Name: WREN, WILLIAM  
Address: 5256 ANDERSON CIRCLE  
City-St-Zip: EVANS, GA 30809

Title: S ( ) Delete  
Name: BIGHAM, JERRY  
Address: 4725 BROOKGREEN ROAD  
City-St-Zip: MARTINEZ, GA 30907

Title: T ( ) Delete  
Name: HARBIN, BERT  
Address: #9 RAINTREE PLACE  
City-St-Zip: AUGUSTA, GA 30909

Title: V ( ) Delete  
Name: MCCRARY, ROBERT III  
Address: 4468 ANDOVER DR  
City-St-Zip: EVANS, GA 30907

## 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 for the exemption stated in Section 119.07(3)(i), 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: JAMES E. BROOME

P

01/13/2003

Electronic Signature of Signing Officer or Director

Date