2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F99000003073

Entity Name: BUILDERS FIRSTSOURCE OF JACKSONVILLE, INC.

FILED Apr 25, 2003 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
6550 ROOSEVELT BLVD JACKSONVILLE, FL 32244							
Current Mailing Address:				New Mailing Address:			
7490 NEW TECHNOLOGY WAY FREDERICK, MD 21703			6550 ROOSEVELT BLVD JACKSONVILLE, FL 32244				
FEI Number: 52-2172981 FEI Number Applied For () FEI Number				mber Not Applicable () Certificate of Status Desired ()			
Name and Address of Current Registered Agent: Name					Name and Address of New Registered Agent:		
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US							
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 Agen	nt			Date	
Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS:			ADDITION	S/CHANGE	S TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	LEVY, PAUL S	Delete ., SUITE 4900 WEST 201		Title: Name: Address: City-St-Zip:	LEVY, PAUL	FON AVENUE, STE. 3350	
Title: Name: Address: City-St-Zip:	YING, DAVID Y	Delete ., SUITE 4900 WEST 201		Title: Name: Address: City-St-Zip:	YING, DAVID	FON AVENUE, STE. 3350	
Title: Name: Address: City-St-Zip:	SHERMAN, FLO	., SUITE 4900 WEST		Title: Name: Address: City-St-Zip:	SHERMAN, F	STREET, ST. 1600	
Title: Name: Address: City-St-Zip:	MILGRIM, BRET	., SUITE 4900 WEST		Title: Name: Address: City-St-Zip:	MILGRIM, BR	TON STREET, STE. 1600	
Title: Name: Address: City-St-Zip:	MCALEENAN, DO	., SUITE 4900 WEST		Title: Name: Address: City-St-Zip:	MCALEENAN	STREET, STE. 1600	
		Delete		Title:	SVTS ((X) Change()Addition	

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.

Name:

Address:

City-St-Zip:

O'MEARA, KEVIN P

DALLAS, TX 75201

2001 BRYAN STREET, STE. 1600

SIGNATURE: ROBERT T. PFORDRESHER VPF 04/25/2003

O'MEARA, KEVIN P

DALLAS, TX 75201

2200 ROSS AVE., SUITE 4900 WEST

Name:

Address:

City-St-Zip:

CROW, CHAD VP 2001 BRYAN STREET, STE. 1600 DALLAS, TX 75201

WIER, JEFFREY A. AS 2001 BRYAN STREET, STE. 1600 DALLAS, TX 75201

DICKINSON, DEBORAH AT 2001 BRYAN STREET, STE. 1600 DALLAS, TX 75201

ROBERT T. PFORDRESHER VPF 6550 ROOSEVELT BLVD JACKSONVILLE, FL 32244

TURNAGE, GREG EVP 6550 ROOSEVELT BLVD JACKSONVILLE, FL 32244

HORN, CHARLES L. SVPF 2001 BRYAN STREET, STE. 1600 DALLAS, TX 75201

TOLLY, MORRIS P 2451 HWY 501 EAST CONWAY, SC 29526

TOLLY, MORRIS P