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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H12058

UNITED BUILDING PRODUCTS, INC.

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Mar 27 1997 8:00am	1
Secretary of State	

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3510 N MONE TALLAHASSEE									
US						3. Date Incorporated or Qualified 07/13/1984		te of Last R 05/1996	leport
2. Principa P 21	Place of Business	2a. Mailing Addres	SS			4. FEI Number 59-2810227	·		pplied For of Applicable
Sule, Apt	#, etc	Suite, Apl. #, e	tc.			5. Certificate of Status Desired		\$8.75	Additional equired
City & Stat	C	City & State				Election Campaign Financing Trust Fund Contribution			May Be to Fees
Ζηρ 24	Country 25	Zip 29	30 Co.	untry			Yes [] No	. 199.032,
	9. Name and Address of Currer	nt Registered Agent				10. Name and Address of New Re	gistered A	gent	
MU	INROE, W. BRADLEY			B1	Name				
329	EAST VIRGINIA STREET LLAHASSEE FL 32301			82	Street Addr	ess (P.O. Box Number is Not Acceptab	ole)		
				83					
				84	City		FL	85 Zip	Code
11. Pursuant office or r agent Ta SIGNATURE						oration submits this statement for the poor's board of directors. I hereby accept		changing it intment as	ts registered registered
	Stylindary typical or printed name of registered ag	ent and to clif applicable ID DIRECTORS	(NOTE Registers	ad Age	nt signature require	ed when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE CDC AND	DIBECTOE	20 IN 12
12.	DP OFFICERS AN	DELE		121 E		ADDITIONS/CHANGES TO OFFIC	ZENS AND	Change	Addition
NAME	CARNES, ROBERT T.	L_ ptcc		IAME				Ontinge	LLI AGGIRON
STREET ADDRESS	POST OFFIC EBOX 395				ADDRESS				
CITY ST-ZIP	MIDWAY FL 95		ŧ	ITY-S	1				
101.f	DV	DELE			1 60			Change	Addition
NAM 1	CARNES, ROBERT T JR.		1						
STREET ADDRESS	3105 ELLENFORD PLACE		2.2 N	(AMŁ	l l			C Ontange	
	3100 ELLENFURD FLACE		2.2 N 2.3 S		ADDRESS			Onlings	
CHY-ST ZIP	TALLAHASSEE FL		2.3 \$		· · · · · · · · · · · · · · · · · · ·			□ Onlange	
COTY ST 70P TOUE		DELE	23S 2.40	STREET CITY - S	· · · · · · · · · · · · · · · · · · ·			Change	Addition
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THEF		DELF	23 S 2.40 ETE 3.1 T 3.2 N	STREET CITY - S TITLE HAME	· · · · · · · · · · · · · · · · · · ·	:			
TOUE NAME			23 S 2.4 (3.1 T 32 N 33 S 34.0	STREET CITY - S TITLE HAME	ADDRESS			□ Change	Addition
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THEE NAME SPECEL ADORESS COLY ST ZH THEE NAME STHEEL ADORESS		DELE	23S 2.40 3.17 32N 33S 34.0 EIE 41T 4.21 4.3S 4.40	CITY-S TITLE HAME STREET CITY-S TITLE NAME STREET CITY-S CITY-S	ADDRESS ST-ZIP ADDRESS ADDRESS	:		Change	Addition
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Large same was each manner supposed with this nining does not quarry for the exemption stated in Section 119.0/(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that Large an efficier or director of the corporation or the receiver or frustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an addition.

SIGNATURE: Robert T. Carnes, Sr. SIGNATURE AND TYPED OR PRINTED NAME OF

3|21|97 904) 562-3510