

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# H24306

FILED  
Mar 05, 2003  
Secretary of State

**Entity Name:** CORNERSTONE BUILDING SYSTEMS, INC.

## Current Principal Place of Business:

409 MONTGOMERY RD  
STE 135  
ALTAMONTE SPRINGS, FL 32714

## Current Mailing Address:

PO BOX 916297  
LONGWOOD, FL 32791

## New Principal Place of Business:

1428 E. SEMORAN BOULEVARD  
STE 106  
APOPKA, FL 32703

## New Mailing Address:

1428 E. SEMORAN BOULEVARD  
STE 106  
APOPKA, FL 32703

**FEI Number:** 59-2460196

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

## Name and Address of Current Registered Agent:

SMITH, CHARLES D.  
409 MONTGOMERY ROAD, SUITE 135  
ALTAMONTE SPRINGS, FL 32714

## Name and Address of New Registered Agent:

SMITH, CHARLES D.  
1428 E. SEMORAN BOULEVARD  
STE 106  
APOPKA, FL 32703

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: CHARLES D. SMITH

03/05/2003

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( )**

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: SMITH, CHARLES D.,  
Address: 409 MONTGOMERY ROAD, SUITE 135  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: SMITH, CHARLES D.,  
Address: 1428 E. SEMORAN BOULEVARD  
City-St-Zip: APOPKA, FL 32703

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: CHARLES D. SMITH

PD

03/05/2003

Electronic Signature of Signing Officer or Director

Date