

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Sep 02, 2008 8:00 am
Secretary of State

09-02-2008 90032 045 ***558.75

DOCUMENT # H34217

1. Entity Name
BUILDING INDUSTRIES, INC.



Principal Place of Business
**2001 13TH AVE. NO.
ST. PETERSBURG, FL 33713 US**

Mailing Address
**2001 13TH AVE. NO.
ST. PETERSBURG, FL 33713 US**

40114300



05062008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2475913

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**BYRNE, JAMES A ESQUIRE
540 FOURTH STREET NORTH
SAINT PETERSBURG, FL 33701**

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00
Due by September 12, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
CARROLL, JAMES R.
568 CRYSTAL DR.
MADIERA BEACH, FL 33708**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VST
CARROLL, JEFF S.
5060 86TH AVE. N.
PINELLAS PARK, FL 33782**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Jeff S. Carroll - V.P.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-26-08
Date

727 822-3370
Daytime Phone #