2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J31591

FILED Apr 20, 2009 Secretary of State

Entity Name: RO-MAC LUMBER & SUPPLY OF TALLAHASSEE, INC.

Current P	rincipal Place of E	susiness:	New Princip	oal Place of Business:	
	ADISON ST. SSEE, FL 32304				
Current Mailing Address:		New Mailing Address:			
	ADISON ST. SSEE, FL 32304		P.O. BOX 17 TALLAHASS	714 SEE, FL 32302	
El Number	: 59-2710865 FE	Number Applied For()	FEI Number Not Applic	able () Certificate of	f Status Desired ()
Name and	d Address of Curre	nt Registered Agent:	Name and A	Address of New Registe	ered Agent:
S31 W. MÁ ΓALLAHA	ROBERT T. ADISON STREET SSEE, FL 32304	US its this statement for the p	ournoso of changing its	registered office or regis	torod agent or both
				redistered office of redis	stereu agent, or both,
	e of Florida.	its this statement for the p	ourpose of offeringing he	3	J , ,
n the Stat	e of Florida. * RE:	·	, , ,	J J	
n the State	e of Florida. RE: Electronic Si	gnature of Registered Ago	, , ,	Date	
n the State	e of Florida. RE: Electronic Si	gnature of Registered Ago	ent		e
n the State	e of Florida. RE: Electronic Si mpaign Financing Trus	gnature of Registered Agost Fund Contribution (). S:	ent	Date	e ERS AND DIRECTOR
n the State BIGNATUI Election Car DFFICER Title: Jame: Address:	e of Florida. RE: Electronic Si mpaign Financing Trus S AND DIRECTOR P () Delet ROBUCK, ROBERT 1 631 W. MADISON ST	gnature of Registered Age of Fund Contribution (). S: e L R	ADDITIONS Title: Name: Address: City-St-Zip: Title: Name: Address:	Date	e RS AND DIRECTOR
n the State BIGNATUI Election Cal DFFICER Title: Iame: Iddress: Title: Iame: Iddress:	e of Florida. RE: Electronic Si mpaign Financing Trus S AND DIRECTOR P () Delet ROBUCK, ROBERT 1 631 W. MADISON ST TALLAHASSEE, FL CP () Delet MCKENZIE, MICHAE 631 W MADISON ST.	gnature of Registered Age it Fund Contribution (). S: e L R	ADDITIONS Title: Name: Address: City-St-Zip: Title: Name: Address:	Date CHANGES TO OFFICE () Change () And VP (X) Change () And MCKENZIE, MICHAEL R 631 W MADISON ST.	e ERS AND DIRECTOR ddition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: MICHAEL R. MCKENZIE VP 04/20/2009