

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000005451

FILED
Apr 22, 2008
Secretary of State

Entity Name: ADVANCED BUILDING PRODUCTS & SERVICES, LLC

Current Principal Place of Business:

2014 EAST ADAMS ST
JACKSONVILLE, FL 32202

New Principal Place of Business:

1900 WAMBOLT STREET
JACKSONVILLE, FL 32202

Current Mailing Address:

4446 HENDRICKS AVE
SUITE 412
JACKSONVILLE, FL 32207 US

New Mailing Address:

1900 WAMBOLT STREET
JACKSONVILLE, FL 32202

FEI Number: 56-2315245

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRAY, CATHERINE J
2014 EAST ADAMS ST
JACKSONVILLE, FL 32202 US

Name and Address of New Registered Agent:

GRAY, CATHERINE J
4446 HENDRICKS AVE
SUITE 412
JACKSONVILLE, FL 32207 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:

04/22/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: WILSON, STEVEN
Address: 2014 EAST ADAMS ST
City-St-Zip: JACKSONVILLE, FL 32202 US

Title: MGRM () Delete
Name: WILSON, COURTENAY S
Address: 2014 EAST ADAMS ST
City-St-Zip: JACKSONVILLE, FL 32202 US

Title: MGR () Delete
Name: FRANK, JIM
Address: 2014 EAST ADAMS ST
City-St-Zip: JACKSONVILLE, FL 32202 US

Title: MGR (X) Delete
Name: GRAY, CATHERINE J
Address: 2014 EAST ADAMS ST
City-St-Zip: JACKSONVILLE, FL 32202 US

Title: MGR (X) Delete
Name: TURVEY, SUSAN H
Address: 2014 EAST ADAMS ST
City-St-Zip: JACKSONVILLE, FL 32202 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: WILSON, STEVEN
Address: 2030 EAST ADAMS STREET
City-St-Zip: JACKSONVILLE, FL 32202 US

Title: MGR (X) Change () Addition
Name: GRAY, CATHERINE J
Address: 4446 HENDRICKS AVE #412
City-St-Zip: JACKSONVILLE, FL 32207 US

Title: MGR (X) Change () Addition
Name: TURVEY, SUSAN H
Address: 1900 WAMBOLT ST
City-St-Zip: JACKSONVILLE, FL 32202 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: CATHERINE J GRAY

MGR

04/22/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date