

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000105570

FILED  
Jan 23, 2007  
Secretary of State

**Entity Name:** HILLSBOROUGH BUILDERS SUPPLY, LLC

**Current Principal Place of Business:**

202 SOUTH ROME AVE  
SUITE 100  
TAMPA, FL 33606

**New Principal Place of Business:**

**Current Mailing Address:**

202 SOUTH ROME AVE  
SUITE 100  
TAMPA, FL 33606

**New Mailing Address:**

**FEI Number:** 20-5845457      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

FOSTER, MATTHEW J  
202 SOUTH ROME AVE  
SUITE 100  
TAMPA, FL 33606 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: DEL VALLE, RAFAEL S  
Address: 202 SOUTH ROME AVE, SUITE 100  
City-St-Zip: TAMPA, FL 33606

**ADDITIONS/CHANGES:**

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

I hereby certify that the information supplied with this filing does not qualify for the 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: RAFAEL DEL VALLE      MGR      01/23/2007

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