

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M01000000464

FILED
Apr 28, 2009
Secretary of State

Entity Name: GILMAN BUILDING PRODUCTS, LLC

Current Principal Place of Business:

581705 WHITE OAK RD
YULEE, FL 32097

New Principal Place of Business:

Current Mailing Address:

581705 WHITE OAK RD
YULEE, FL 32097

New Mailing Address:

FEI Number: 58-2611276

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SORRENTINO, DOMINICK R
581705 WHITE OAK ROAD
YULEE, FL 32097 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: CEO () Delete
Name: BERGREEN, BERNARD D
Address: 111 WEST 50TH STREET, 7TH FLOOR
City-St-Zip: NEW YORK, NY 10020

Title: P () Delete
Name: GARRETT, VICTOR
Address: 581705 WHITE OAK ROAD
City-St-Zip: YULEE, FL 32097

Title: VP () Delete
Name: MOODY, NATALIE
Address: 111 W 50TH ST, 7TH FLOOR
City-St-Zip: NEW YORK, NY 10020

Title: AS () Delete
Name: SORRENTINO, DOMINICK
Address: 581705 WHITE OAK RD
City-St-Zip: YULEE, FL 32097

Title: TS () Delete
Name: CROPPER, STEPHEN W
Address: 111 W 50TH ST, 7TH FLOOR
City-St-Zip: NEW YORK, NY 10020

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

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

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

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

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

Title: AS () Change (X) Addition
Name: LEVINE, HAROLD
Address: 111 W 50TH ST., 7TH FLOOR
City-St-Zip: NEW YORK, NY 10020

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: DOMINICK SORRENTINO

AS

04/28/2009

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