

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 05, 2004 8:00 am**  
**Secretary of State**

04-05-2004 90499 019 \*\*\*\*50.00

**DOCUMENT # M03000002762**

1. Entity Name  
**GOLD BUILDING SUPPLIES, L.L.C.**



Principal Place of Business: **2631 INDUSTRIAL WAY  
VINELAND, NJ 08360**  
Mailing Address: **2631 INDUSTRIAL WAY  
VINELAND, NJ 08360**

2. Principal Place of Business  
Suite, Apt. #, etc. **1800 12TH ST. SE**  
City & State **LARGO, FL**  
Zip **33771** Country **USA**

3. Mailing Address  
Suite, Apt. #, etc.  
City & State  
Zip Country

03112004 Chg-LLC CR2E083 (10/03)

4. FEI Number **13-4223519**  
Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **\$5.00** Additional Fee Required

**6. Name and Address of Current Registered Agent**

**DAGOSTINO, ANTHONY  
12812 HARBOR WOOD DRIVE  
LARGO, FL 33774**

**7. Name and Address of New Registered Agent**

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City **FL** Zip Code

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)

**Filing Fee is \$50.00  
Due by May 1, 2004**

DEPARTMENT OF STATE  
FOR DEPOSIT ONLY  
ACCT # 1009068796  
Make check payable to  
Florida Department of State  
APR 10 2004

**9. MANAGING MEMBERS/MANAGERS**

TITLE **MGR** ☐ Delete  
NAME **GOLDSTEIN, ADAM**  
STREET ADDRESS **2631 INDUSTRIAL WAY**  
CITY-ST-ZIP **VINELAND, NJ 08360**

TITLE **MGR** ☒ Delete  
NAME **DAGOSTINO, ANTHONY**  
STREET ADDRESS **12875 WALSINGHAM ROAD**  
CITY-ST-ZIP **LARGO, FL 33774**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**10. ADDITIONS/CHANGES**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **MGR** ☒ Change ☐ Addition  
NAME **DAGOSTINO, ANTHONY**  
STREET ADDRESS **12812 HARBOR WOOD DRIVE**  
CITY-ST-ZIP **LARGO, FL 33774**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:** \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

**3-31-04**

Date

Daytime Phone #