2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 10, 2006 08:00 AM
Secretary of State

DOCUMENT # M04000000718

1. Entity Name
BUILDERS FIRSTSOURCE - SOUTHEAST GROUP, LLC

Principal Place of Business	Mailing Address
2451 HIGHWAY 501 EAST CONWAY, SC 29526	2451 HIGHWAY 501 EAST CONWAY, SC 29526

01062006No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
57-0618425
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

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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 _____ DATE
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, 2006

U00000499916
04/24/06-80048-024 50.00

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGR
NAME	MILGRIM, BRETT N
STREET ADDRESS	450 LEXINIGTON AVENUE, SUITE 3350
CITY-ST-ZIP	NEW YORK, NY 10017
TITLE	MGR
NAME	FRANK, RAMSEY
STREET ADDRESS	450 LEXINIGTON AVENUE, SUITE 3350
CITY-ST-ZIP	NEW YORK, NY 10017
TITLE	MGR
NAME	SHERMAN, FLOYD
STREET ADDRESS	2001 BRYAN STREET, SUITE 1600
CITY-ST-ZIP	DALLAS, TX 72501
TITLE	MGR
NAME	LEVY, PAUL S
STREET ADDRESS	450 LEXINGTON AVENUE, SUITE 3350
CITY-ST-ZIP	NEW YORK, NY 10017
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Donald F. McAleenan 3/23/06 214-880-3520
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #