

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000071653

FILED
Apr 11, 2007
Secretary of State

Entity Name: FLORIDA BUILDING MATERIALS, INC.

Current Principal Place of Business:

6321 W JONES AVENUE
ZELLWOOD, FL 32798

New Principal Place of Business:

Current Mailing Address:

33 EAST MAIN STREET, 2ND FLOOR
APOPKA, FL 32703

New Mailing Address:

FEI Number: 59-3674935

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WAHLSE, CONNIE
4907 W KELLY PARK RD
APOPKA, FL 327125173 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WARNER, COREY
Address: 3361 DAVIDS LANE
City-St-Zip: ZELLWOOD, FL 32798

Title: VD () Delete
Name: WAHLSE, CONNIE
Address: 4907 W KELLY PARK RD
City-St-Zip: APOPKA, FL 327125173

Title: SD () Delete
Name: WARNER, SHAWN
Address: 3361 DAVIDS LANE
City-St-Zip: ZELLWOOD, FL 32798

Title: TD () Delete
Name: GORDON, PAUL
Address: 8708 ALEGRE CIRCLE
City-St-Zip: ORLANDO, FL 32836

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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:

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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CONNIE WAHLSE

VD

04/11/2007

Electronic Signature of Signing Officer or Director

Date