2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000071653

Title:

Name:

Address:

City-St-Zip:

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GORDON, PAUL

8708 ALEGRE CIRCLE

ORLANDO, FL 32836

FILED Apr 18, 2008 Secretary of State

Entity Nai	me: FLORID.	A BUILDING MATERIALS, INC) .				
Current Principal Place of Business:			New Prin	New Principal Place of Business:			
	ONES AVENU DD, FL 32798	E					
Current Mailing Address:			New Mailing Address:				
33 EAST N APOPKA,		, 2ND FLOOR					
FEI Number:	: 59-3674935	FEI Number Applied For ()	FEI Number Not App	olicable ()	Certificate of Status Desire	d ()	
Name and	l Address of	Current Registered Agent:	Name and	Name and Address of New Registered Agent:			
	CONNIE ELLY PARK R FL 32712517						
	named entity e of Florida.	submits this statement for the	purpose of changing	its registered	office or registered agent,	or both,	
SIGNATUR	RE:						
	Electro	nic Signature of Registered Ag	jent		Date		
Election Car	mpaign Financir	g Trust Fund Contribution ().					
OFFICERS	S AND DIREC	CTORS:	ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PD (WARNER, CO 3361 DAVIDS ZELLWOOD,	LANE	Title: Name: Address: City-St-Zip:	WARNER, CO	ING HORSE LANE		
Title: Name: Address: City-St-Zip:	VD (WAHLSE, COI 4907 W KELL APOPKA, FL	Y PARK RD	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	SD (WARNER, SH. 3361 DAVIDS ZELLWOOD,	LANE	Title: Name: Address: City-St-Zip:	WARNER, SH	ING HORSE LANE		

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 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: CONNIE WAHLSE VD 04/18/2008

() Change () Addition