

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000071653

FILED  
Apr 04, 2003  
Secretary of State

**Entity Name:** FLORIDA BUILDING MATERIALS, INC.

**Current Principal Place of Business:**

6321 W JONES AVENUE  
ZELLWOOD, FL 327981239

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1239  
ZELLWOOD, FL 327981239

**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 327980931

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 327980931

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 Section 119.07(3)(i), 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

04/04/2003

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date