2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000038010

FILED Apr 29, 2009 Secretary of State

| Entity Name: SUNBEL ⁻ | Γ BUILDING SUPPLY, INC. | | | |
|---|----------------------------------|--|--|--|
| Current Principal Place of Business: | | New Principal Place of Business: | | |
| 400 SADDLEWORTH PLACE LAKE MARY, FL 32746 | | 101 GOLDEN MALAY PALM WAY DAVENPORT, FL 33897 | | |
| Current Mailing Address: | | New Mailing Address: | | |
| 400 SADDLEWORTH PL LAKE MARY, FL 32746 | ACE | | | |
| FEI Number: 59-3719539 | FEI Number Applied For() | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | Name and Address of | Name and Address of New Registered Agent: | |
| MEADOWS, DAVID 400 SADDLEWORTH PL LAKE MARY, FL 32746 | | | | |
| The above named entity s in the State of Florida. | submits this statement for the p | ourpose of changing its registered | office or registered agent, or both, | |
| SIGNATURE: | | | | |
| Electronic Signature of Registered Agent | | ent | Date | |
| Election Campaign Financing | Trust Fund Contribution (). | | | |
| OFFICERS AND DIRECTORS: | | ADDITIONS/CHANGE | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |

Title: (X) Change () Addition () Delete Title: MEADOWS, DAVID M MEADOWS, DAVID M Name: Name: 400 SADDLEWORTH PLACE Address: 400 SADDLEWORTH PLACE Address: City-St-Zip: HEATHROW, FL 32746 City-St-Zip: LAKE MARY, FL 32746

Title: DST (X) Delete Title: () Change () Addition

CLARK, LINDA C Name: Name: 510 DOUGLAS AVE STE. 1001 Address: Address: ALTAMONTE SPRINGS, FL 32714 City-St-Zip: City-St-Zip:

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.

SIGNATURE: DAVID M MEADOWS Ρ 04/29/2009