2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000065331

Entity Name: BUILDERS FIRST CHOICE, INC.

FILED Feb 24, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of	or Business:
4430 E ADAMO DRIVE TAMPA, FL 33603 Current Mailing Address:			4420 E ADAMO DRIVE SUITE 301 TAMPA, FL 33605 New Mailing Address:	
FEI Number	: 20-2786969	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	l Address of Cur	rent Registered Agent:	Name and Address of	New Registered Agent:
7 SOUTH	STEPHEN H. LIME AVE. ⁻ A, FL 34237 U	JS		
	e named entity sub e of Florida.	omits this statement for the	purpose of changing its registered	office or registered agent, or both,
SIGNATU				
Flection Ca		Signature of Registered Ag rust Fund Contribution ().	ent	Date
	S AND DIRECTO	.,	ADDITIONS/CHANGE	S TO OFFICERS AND DIRECTORS
Title: Name: Address: City-St-Zip:	D () De TIFFANY, ROBER' P.O. BOX 733 ONECO, FL 3426	elete ΓM.		()Change ()Addition
Title: Name: Address: City-St-Zip:	D () De TIFFANY, BARBAF P.O. BOX 733 ONECO, FL 3426	A G.	Title: Name: Address: City-St-Zip:	()Change ()Addition
Title: Name: Address: City-St-Zip:	P () De MOLNAR, PAUL 4705 MARSH HAW VALRICO, FL 335	/к ст.	Title: Name: Address: City-St-Zip:	()Change ()Addition

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.

Address:

City-St-Zip:

SIGNATURE: ROBERT TIFFANY DIR 02/24/2009

3215 PARTRIDGE POINT TRAIL

VALRICO, FL 33594

Address:

City-St-Zip: