

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P09346**

1. Entity Name

BINNINGS BUILDING PRODUCTS, INC.**FILED****Jan 29, 2001 8:00 am**
Secretary of State

01-29-2001 90069 034 ***150.00

Principal Place of Business 210 WALSER RD P.O. BOX 868 LEXINGTON NC 27293 US	Mailing Address 755 BOARDMAN-CANFIELD RD. BUILDING G-WEST BOARDMAN OH 44512 US
--	--

2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address 860 Boardman-Canfield Rd. Suite, Apt. #, etc. Suite 107
---	---

City & State City & State Boardman, Ohio	4. FEI Number 13-3325772	Applied For <input type="checkbox"/> Not Applicable
Zip Country 44512 USA	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
--	---

8. 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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/>	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
---	---	--

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DCP AMEDIA, FRANK J 755 BOARDMAN-CANFIELD RD., BLDG. G-WEST BOARDMAN OH 44512 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SCHOENIKE, JONATHAN K 755 BOARDMAN-CANFIELD RD. BLDG. G-WEST BOARDMAN OH 44512 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 860 Boardman-Canfield Rd., Suite 107 Boardman, Ohio 44512
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DCPT DOMINJANNI, JOSEPH 6500 BROOKTREE RD., SUITE 202 WEXFORD PA 15090 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO HULL, WILLIAM 755 BOARDMAN O CANFIELD RD YOUNGSTOWN OH 44512 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS WOLFE, DAVID J 755 BOARDMAN-CANFIELD RD., BLDG. G-WEST BOARDMAN OH 44512 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 860 Boardman-Canfield Rd., Suite 107 Boardman, Ohio 44512
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition VP Larry Powell 3000 NW 125th Street Miami, Florida 33167

13. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-18-01

330.965.9918

CR2E034 (10/00)