2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P25361

Entity Name: HANSON ROOF TILE, INC.

FILED Apr 28, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
1340 S.W. 34TH AVE. DEERFIELD BEACH, FL 33442			300 E. JOHN CARPE IRVING, TX 75062	300 E. JOHN CARPENTER FREEWAY IRVING, TX 75062	
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
300 E. JOHN CARPENTER FREEWAY IRVING, TX 75062					
FEI Number:	74-2513534 F	El Number Applied For()	FEI Number Not Applicable()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 US					
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 S	Signature of Registered Agent		Date	
Election Cam	paign Financing Tru	ust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DVP () Deli MANNING, RICHARI 300 E. JOHN CARP IRVING, TX 75062	DC	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T () Delo CHARLES, WARD 15720 JOHN J. DEL CHARLOTTE, NC 2	ANEY DRIVE, STE 555	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V/SD () Delo HYER, MICHAEL H 300 E. JOHN CARP IRVING, TX 75062		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	P () Dele DONAHUE, MICHAE 15720 JOHN J. DEL CHARLOTTE, NC 2	EL J .ANEY DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	AS () Delo CAPELLI, TOM 300 E. JOHN CARP IRVING, TX 75062		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	AS () Dele HUTCHINSON, JOH 300 E. JOHN CARP IRVING, TX 75062	NM	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.

SIGNATURE: JOHN M. HUTCHINSON AS 04/28/2009