FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9800004567

1. Corporation Name

BUILDING MATERIALS NET, INC.

Builderane Inc

May 05, 1999 8:00 am Secretary of State

05-05-1999 90170 049 ***150.00



00	Mascape, Inc.										
Principal Place of Business Mailing Address							-	FILL DOLLS DUSEL D	Mill Asmai as		
7800 BELFORT PARKWAY 7800 BELFORT PARKWAY											
JACKSONVILLE			CKSONVILLE FL 32256								
							DO NOT WRI	TE IN THIS	SPACE	····	
							3. Date Incorporated or Qualifed				
		-					01/13/1998				
2. Principal Place of Business			2a. Mailing Address				4. FEI Number		Applied For		
21			<u> </u>				59-3485326	'		Not Applicable	
Suite, Apt. #, etc.			Suite, Apt. #, etc.			İ	5. Certifcate of Status Desired		•	5 Additional Required	
22			City B State								
City & State			City & State				6. Election Campaign Financing			May Be ded to Fees	
Zip Country			Zip Country				Trust Fund Contribution			d to rees	
i	25	29	30	7	, y		 This corporation owes the curl Personal Property Tax. 	ent year int	angibie □Yes	ÆNo	
24	9. Name and Address of Current			<u>'</u>			10. Name and Address of New I	Registered			
5. Maine and Address of Current Registered Agent					1 Name	_	7 - /		<u>.g</u>		
KIRS	CHNER MAIN GRAHAM TANNER	& DE	MONT, PA				atherine J. Gra	y			
ONE INDEPENDENT DRIVE, SUITE 2000					2 Street A	Addres	ss (P.O. Box Number is Not Accept	able) The leave	9.,		
JACKSONVILLE FL 32202					3 /	<u> </u>	00 Belfort H	reac	y		
7.0.1.0.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.						TU	THE 100				
				8	4 City		- cucanulla	FL	85 Z	p Code	
44 Dumanast	to the provisions of Sections 607.0502	and 6	07 1509 Florido Statutos	the abo	t bomon ou	10	ration submits this statement for the		changing	its registered	
office or r	egistered agent, or both, in the State of m familiar with, and accept the obligati	f Florid	Such change was auth	orized b	y the corpo	ration	n's board of directors. I hereby acce	pt the appoi	ntment as	registered	
agent. I a	Statute	es.	1.	TP	.11	1/2	أممار				
SIGNATURE Signature, typed or printed name of registered agent and little if applicable. (NOTE: Ref					ent signature re	Ü	Unerine J. Dray	DATE	4/28	7/99	
12.	OFFICERS AND			13.	on signature to	rquii au w	ADDITIONS/CHANGES TO OF	FICERS AN	D DIREC	TORS IN 12	
TITLE	P,C	, 01112	DELETE	1.1 TITLE	····	5	7,0001101101011111010110101	1102110111	Chang		
NAME	"			1.2 NAME		ΔL.	int, Laura A.			_	
	MANE Wilson, J. Steven TREET ADDRESS TREET ADDRESS TROO BELCOTT Parkenay, Suite 100				ET ADDRESS	70	on Ral Fort Plenkway, SI	rite 100		İ	
CITY-ST-ZIP	Jecksonville, FL 3225	გ, - ზ		1.4 CITY-	ST-7IP	داد	ou Belfort Perkusoy, St edisonville FL 32256				
TITLE			☐ DELETE	2.1 TITLE					☐ Chang	e Addition	
NAME	VP, 6, T		_	2.2 NAME						_	
STREET ADDRESS	Gray, Catherine J. 7800 Belfort Parkway, Suik 100				ET ADDRESS						
	Judisonville FL 32256				-ST-ZIP					Į	
CITY-ST-ZIP TITLE	□ pri rrC								Chang	je Addition	
NAME	AS, AT		_	3.1 TITLE					·	Ì	
STREET ADORESS	Turvey, Susen H. 7800 Bufort Parkway, Juit 100 Jacksonnik Fr 32250				ET ADDRESS						
CITY-ST-ZIP	1800 Bullott FL 3235	ø		3 4. CITY							
TITLE	A5		☐ DELETÉ	4.1 TITLE					Chang	je 🔲 Addition	
NAME	Graham, T. Malculm		_	4, 2 NAM							
STREET ADDRESS		<u>'</u> ۲ س	it 100	İ	ET ADDRESS						
CITY-ST-ZIP	Jacksonville FL 32256			4.4 CITY-							
TITLE	16		□ DELETE	5.1 TITLE			*		☐ Chang	ge	
NAME				5.2 NAME							
STREET ADDRESS	Shriftman, morris		wite 100	5.3 STRE	ET ADDRESS						
CITY-ST-ZIP	7800 Ballort Porkus	დ. ე ჯ	•	5.4 CITY-	1					}	
TITLE	TRUESPOUNT 12 0822	-	☐ DELETE	61 TITLE					☐ Chang	e Addition	
NAME				6.2 NAME							
					ET ADDRESS						
STREET ADDRESS											

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with a other like empowered.

SIGNATURE: