


2007 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
Jan 18, 2007 08:00 AM
Secretary of State

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| DOCUMENT # P99000094687 |  |
| 1. Entity Name KEYSTONE BUILDING CENTER, INC. | |

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| Principal Place of Business 200 COMMERCIAL CIR KEYSTONE HEIGHTS, FL 32656 | Mailing Address PO BOX 1249 KEYSTONE HEIGHTS, FL 32656 |
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01052007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

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| 4. FEI Number 59-3607391 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | |

6. Name and Address of Current Registered Agent

TAYLOR, JAMES J JR.
420 S. LAWRENCE BLVD.
KEYSTONE HEIGHTS, FL 32656

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: _____ (NOTE: Registered Agent signature required when formulating) DATE: _____

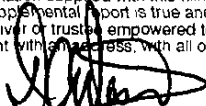
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| FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | U000000591420 01/19/07-80022-013 150.00 |
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10. OFFICERS AND DIRECTORS

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| TITLE NAME STREET ADDRESS CITY- ST- ZIP | D CANADY, ROBERT G 7155 SE 2ND PLACE STARKE, FL 32091 |
| TITLE NAME STREET ADDRESS CITY- ST- ZIP | D WISE, DOUGLAS C 8637 SW 42ND PLACE GAINESVILLE, FL 32608 |
| TITLE NAME STREET ADDRESS CITY- ST- ZIP | |
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| TITLE NAME STREET ADDRESS CITY- ST- ZIP | |

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with my address, with all other like empowered.

SIGNATURE:  01/06/07 352-473-9991

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: DOUGLAS C. WISE