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**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

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CORPORATION ANNUAL REPORT 1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 838665 (8)
1. Corporation Name
TAYLOR BUILDING PRODUCTS COMPANY

Principal Place of Business Mailing Address
C/O MASCOTECH, INC
21001 VAN BORN RD
TAYLOR MI 48180
US

2. Principal Place of Business 2a. Mailing Address
21 631 North First St. 26
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 City & State 27 City & State
23 West Branch, MI 28
Zip Country Zip Country
24 48661 25 U.S.A. 29 30

3. Date Incorporated or Qualified 3a. Date of Last Report
06/28/1977 04/29/1994
4. FEI Number Applied For
38-1236748 Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
7. This corporation has liability for intangible tax under S. 193.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent
CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-registering)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	AS	1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DORAN, DAVID A.	12 NAME	
STREET ADDRESS	21001 VAN BORN ROAD	13 STREET ADDRESS	
CITY - ST - ZIP	TAYLOR MI	14 CITY - ST - ZIP	
TITLE	VTD	21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WADHAMS, TIMOTHY	22 NAME	
STREET ADDRESS	21001 VAN BORN ROAD	23 STREET ADDRESS	
CITY - ST - ZIP	TAYLOR MI	24 CITY - ST - ZIP	
TITLE	VD	31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GARDNER, LEE M	32 NAME	
STREET ADDRESS	21001 VAN BORN ROAD	33 STREET ADDRESS	
CITY - ST - ZIP	TAYLOR MI	34 CITY - ST - ZIP	
TITLE	S	41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SILVERMAN, BARRY J.	42 NAME	
STREET ADDRESS	21001 VAN BORN ROAD	43 STREET ADDRESS	
CITY - ST - ZIP	TAYLOR MI	44 CITY - ST - ZIP	
TITLE	P	51 TITLE	Executive Vice President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BURGESS, DON	52 NAME	
STREET ADDRESS	631 N. FIRST STREET	53 STREET ADDRESS	
CITY - ST - ZIP	WEST BRANCH MI	54 CITY - ST - ZIP	
TITLE		61 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		62 NAME	P Raymon Hunt
STREET ADDRESS		63 STREET ADDRESS	631 N. First Street
CITY - ST - ZIP		64 CITY - ST - ZIP	West Branch, MI 48661

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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.

SIGNATURE: David A. Doran Assistant Secretary 4/5/95 (313) 274-7400
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (System Name)