

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000008904

FILED
Apr 07, 2005
Secretary of State

Entity Name: SUNCOAST BUILDING COMPONENTS, L.L.C.

Current Principal Place of Business:

3325 ADDISON DR.
PENSACOLA, FL 325147065

New Principal Place of Business:

5689 INDUSTRIAL BLVD
MILTON, FL 325838720

Current Mailing Address:

3325 ADDISON DR.
PENSACOLA, FL 325147065

New Mailing Address:

5689 INDUSTRIAL BLVD
MILTON, FL 325838720

FEI Number: 59-3660162

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MYSLAK JR, JOHN V
3325 ADDISON DRIVE
PENSACOLA, FL 325147065 US

Name and Address of New Registered Agent:

MYSLAK JR, JOHN V
5689 INDUSTRIAL BLVD
MILTON, FL 325838720 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: _____

04/07/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: P () Delete
Name: MYSLAK, JOHN
Address: 4547 LASSASSIER
City-St-Zip: PENSACOLA, FL 32504

Title: VP () Delete
Name: DAVIS, BRAD
Address: 3325 ADDISON DR.
City-St-Zip: PENSACOLA, FL 325147065

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MYSLAK, JOHN
Address: 4547 LASSASSIER
City-St-Zip: PENSACOLA, FL 32504

Title: MGRM (X) Change () Addition
Name: DAVIS, BRAD
Address: 5689 INDUSTRIAL BLVD
City-St-Zip: MILTON, FL 325838720

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JOHN MYSLAK

MGRM

04/07/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date