

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 466221

Entity Name: CONTINENTAL FLORIDA MATERIALS INC.**Current Principal Place of Business:**2600 EISENHOWER BOULEVARD
PORT EVERGLADES, FL 33316**Current Mailing Address:**300 E. JOHN CARPENTER FREEWAY
LEGAL DEPT
IRVING, TX 75062 US**FEI Number:** 59-1616110**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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 Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title DIRECTOR, CHAIRMAN
Name MORRISH, JONATHAN
Address 300 E. JOHN CARPENTER FREEWAY
City-State-Zip: IRVING TX 75062

Title VICE PRESIDENT & CFO, DIRECTOR
Name BOETTCHER, HENNER
Address 300 E. JOHN CARPENTER FREEWAY
City-State-Zip: IRVING TX 75062

Title VP, SECRETARY
Name LOWRY, CAROL
Address 300 E. JOHN CARPENTER FREEWAY
LEGAL DEPT
City-State-Zip: IRVING TX 75062

Title ASST. SECRETARY
Name HAAS, THADDIUS
Address 300 E. JOHN CARPENTER FREEWAY
City-State-Zip: IRVING TX 75062

Title ASST. SECRETARY
Name YI, AMY
Address 300 E. JOHN CARPENTER FREEWAY
City-State-Zip: IRVING TX 75062

Title PRESIDENT, DIRECTOR
Name HELLER, GLENN
Address 300 E JOHN CARPENTER FREEWAY
City-State-Zip: IRVING TX 75062

Title TREASURER
Name ROBBINS, REBECCA
Address 300 E. JOHN CARPENTER FREEWAY
City-State-Zip: IRVING TX 75062

I hereby 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 all other like empowered.

SIGNATURE: THADDIUS HAAS**ASSISTANT SECRETARY** 04/26/2019_____
Electronic Signature of Signing Officer/Director Detail_____
Date