

**2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P93000088397

**Entity Name:** BUILDER SERVICES GROUP, INC.

**Current Principal Place of Business:**

475 NORTH WILLIAMSON BOULEVARD  
DAYTONA BEACH, FL 32114

**Current Mailing Address:**

475 NORTH WILLIAMSON BOULEVARD  
DAYTONA BEACH, FL 32114 US

**FEI Number: 59-3214406**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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 VP  
Name HUBBARD, RALPH  
Address 475 NORTH WILLIAMSON BOULEVARD  
City-State-Zip: DAYTONA BEACH FL 32114

Title DIRECTOR  
Name PETERSON, JOHN S.  
Address 475 NORTH WILLIAMSON BOULEVARD  
City-State-Zip: DAYTONA BEACH FL 32114

Title SECRETARY  
Name PUGH, JULIE  
Address 475 NORTH WILLIAMSON BOULEVARD  
City-State-Zip: DAYTONA BEACH FL 32114

Title PRESIDENT AND CHIEF OPERATING OFFICER  
Name BUCK, ROBERT M.  
Address 475 NORTH WILLIAMSON BOULEVARD  
City-State-Zip: DAYTONA BEACH FL 32114

Title DIRECTOR, TREASURER  
Name SELLEW, GEORGE M.  
Address 475 NORTH WILLIAMSON BOULEVARD  
City-State-Zip: DAYTONA BEACH FL 32114

*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: JULIE PUGH**

**SECRETARY**

**03/28/2022**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date