

**2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F96000003780

**Entity Name:** GUARDIAN BUILDING PRODUCTS, INC.**Current Principal Place of Business:**979A BATESVILLE ROAD  
GREER, SC 29651**Current Mailing Address:**979A BATESVILLE ROAD  
GREER, SC 29651 US**FEI Number: 58-1968171****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            PRESIDENT, DIRECTOR  
Name            DEMARIE, DONALD  
Address        979A BATESVILLE ROAD  
City-State-Zip: GREER SC 29651

Title            DIRECTOR, VP  
Name            SZNEWAJS, CHRISTOPHER  
Address        979A BATESVILLE ROAD  
City-State-Zip: GREER SC 29651

Title            DIRECTOR, SECRETARY  
Name            SHEPARD, MICHAEL  
Address        979A BATESVILLE ROAD  
City-State-Zip: GREER SC 29651

Title            CFO  
Name            NELLI, WILLIAM F  
Address        979A BATESVILLE ROAD  
City-State-Zip: GREER SC 29651

Title            DIRECTOR  
Name            CHIEFFE, THOMAS  
Address        979A BATESVILLE ROAD  
City-State-Zip: GREER SC 29651

Title            DIRECTOR  
Name            SZNEWAJS, MATTHEW B  
Address        979A BATESVILLE ROAD  
City-State-Zip: GREER SC 29651

*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: WILLIAM F. NELLI****CFO****05/01/2019**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date