

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 533527

FILED  
Apr 25, 2005  
Secretary of State

Entity Name: INDEPENDENT WHOLESALE, INC.

## Current Principal Place of Business:

2729 HANSROB RD  
ORLANDO, FL 32804 US

## New Principal Place of Business:

## Current Mailing Address:

2729 HANSROB RD  
ORLANDO, FL 32804

## New Mailing Address:

FEI Number: 59-1738068

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LEMUS, GERARD M  
1716 N INDIAN RIVER ROAD  
NEW SMYRNA BEACH, FL 32169 US

## Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: LEMUS, GERALD M.,  
Address: 1716 N INDIAN RIVER ROAD  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: D ( ) Delete  
Name: WATSON, JOHN R.,  
Address: 14016 LAKE TILDEN BLVD.  
City-St-Zip: WINTER GARDEN, FL

Title: V (X) Delete  
Name: FRANCIS, ROY III  
Address: 1398 LAQUINTA CT.  
City-St-Zip: WINTER SPRINGS, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 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 an address, with all other like empowered.

SIGNATURE: JOHN R. WATSON

D

04/25/2005

Electronic Signature of Signing Officer or Director

Date