2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2006 08:00 A
Secretary of State

DOCUMENT # F01000001035

1. Entity Name
APEX SUPPLY COMPANY, INC.

Principal Place of Business	Mailing Address
3300 BRECKINRIDGE BLVD. SUITE 100 DULUTH, GA 30096	3300 BRECKINRIDGE BLVD. SUITE 100 DULUTH, GA 30096

DO NOT WRITE IN THIS SPACE

01202006 No Chg-P CR2E034 (11/05)

4. FEI Number
58-2510145

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (DATE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	STRICKLAND, SIDNEY
STREET ADDRESS	3300 BRECKINRIDGE BLVD., SUITE 100
CITY-ST-ZIP	DULUTH, GA 30096
TITLE	VP
NAME	STODDART, JAMES
STREET ADDRESS	5455 PACES FERRY ROAD
CITY-ST-ZIP	ATLANTA, GA 30339
TITLE	V
NAME	WALLACE, HENRY H
STREET ADDRESS	3300 BRECKINRIDGE BLVD., SUITE 100
CITY-ST-ZIP	DULUTH, GA 30096
TITLE	VPT
NAME	TOME', CAROL B
STREET ADDRESS	2455 PACES FERRY ROAD
CITY-ST-ZIP	ATLANTA, GA 30339
TITLE	VPSD
NAME	FERNANDEZ, FRANK L
STREET ADDRESS	2455 PACES FERRY ROAD
CITY-ST-ZIP	ATLANTA, GA 30339
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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03/23/06-80046-008 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ 1/20/06 678-245-3900
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #