2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F76968

Entity Name: INTERSTATE SUPPLY, INC.

FILED Jan 27, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

 500 SOUTH 1ST STREET
 376 S.W. MAIN BLVD.

 LAKE CITY, FL 32055
 US

 LAKE CITY, FL 32025
 US

Current Mailing Address: New Mailing Address:

P.O. BOX 2139

LAKE CITY, FL 321562139 US

FEI Number: 59-2204068 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

 OWENS, GLENN H.
 376 S.W. MAIN BLVD.

 LAKE CITY, FL 32025
 LAKE CITY, FL 32025

OWENS, GLENN H.
376 S.W. MAIN BLVD.
LAKE CITY, FL 32025
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: GLENN OWENS 01/27/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

P () Delete Title: P (X) Change () Addition

 Name:
 OWENS, GLENN H,
 Name:
 OWENS, GLENN H,

 Address:
 500 S. 1ST STREET
 Address:
 376 S.W. MAIN BLVD

 City-St-Zip:
 LAKE CITY, FL 32055
 LAKE CITY, FL 32025

Title: S () Delete Title: S (X) Change () Addition

 Name:
 WATERS, TED E.,
 Name:
 WATERS, TED E.,

 Address:
 500 S. 1ST STREET
 Address:
 376 S.W. MAIN BLVD.

 City-St-Zip:
 LAKE CITY, FL 32055
 City-St-Zip:
 LAKE CITY, FL 32025

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: GLENN OEWNS P 01/27/2004