2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H57167

City-St-Zip:

HAINES CITY, FL 33844

Entity Name: CENTRAL SUPPLY COMPANY

FILED Jan 04, 2008 Secretary of State

| • | | | | | |
|---|--|---------------------------------|---|--|--|
| Current Principal Place of Business: | | | New Principal Place o | New Principal Place of Business: | |
| | USON DRIVE D, FL 32805 | : | | | |
| Current Mailing Address: | | | New Mailing Address: | | |
| | USON DRIVE | | | | |
| SUITE B ORLANDO | D, FL 32805 | US | | | |
| FEI Number: | : 59-2549764 | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | | Name and Address of | Name and Address of New Registered Agent: | |
| 301 EAST | MICHAEL J ES PINE STREE), FL 32801 | Q T, SUITE 1400 US | | | |
| The above in the State | named entity e of Florida. | submits this statement for the | purpose of changing its registered | office or registered agent, or both, | |
| SIGNATU | RE: | | | | |
| Electronic Signature of Registered Agent | | | ent | Date | |
| Election Car | mpaign Financir | ng Trust Fund Contribution (). | | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANGE | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | PS (ERVIN, STEVE 451 FAIRFAX WINTER PARI | AVENUE | Title: (Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | VP (BALDYGA, JU 5221 HAMMOO SAINT CLOUD | CK CIRCLE | Title: (Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: | VP (WITMER, HOU 495 KING STR | | Title: (Name: Address: | () Change() Addition | |

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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.

City-St-Zip:

SIGNATURE: JUDITH A BALDYGA VP 01/04/2008