

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Apr 28, 2009
Secretary of State**

DOCUMENT# J42974

Entity Name: SUPREME PAPER SUPPLIES, INCORPORATED

Current Principal Place of Business:

New Principal Place of Business:

% CHARLES TERRELL KELLY
8967 1/2 PENSACOLA BLVD.
PENSACOLA, FL 32534 US

Current Mailing Address:

New Mailing Address:

% CHARLES TERRELL KELLY
8967 1/2 PENSACOLA BLVD.
PENSACOLA, FL 32534 US

FEI Number: 59-2758083 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:

KELLY, CHARLES TERRELL
8967 1/2 PENSACOLA BLVD.
PENSACOLA, FL 32534 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

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: KELLY, CHARLES TERRELL
Address: 8967 1/2 PENSACOLA BLVD
City-St-Zip: PENSACOLA, FL 32534 US

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

Title: D () Delete
Name: KELLY, BARBARA ANN
Address: 89 MONARCH LANE
City-St-Zip: PENSACOLA, FL 32503 US

Title: D (X) Change () Addition
Name: O'NEIL, DEBBIE
Address: 3102 DEEP WATER COVE
City-St-Zip: MILTON, FL 32583 US

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.

SIGNATURE: CHARLES T KELLY

PRES

04/28/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date