

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 172991

FILED
Mar 10, 2004
Secretary of State

Entity Name: CASTLE SUPPLY COMPANY, INC.

Current Principal Place of Business:

6600 49TH ST. N
PINELLAS PARK, FL 33781 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 357
PINELLAS PARK, FL 33780 US

New Mailing Address:

FEI Number: 59-0690179

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHITE, JOSEPH C.
6600 49TH ST. N
PINELLAS PARK, FL 33781 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: C/D () Delete
Name: WHITE, JOSEPH C.,
Address: 10750 SPRING ST.
City-St-Zip: LARGO, FL

Title: TD () Delete
Name: WHITE, ROSEMARY A,
Address: 13300 INDIAN ROCKS RD
City-St-Zip: LARGO, FL 00000,

Title: D () Delete
Name: WHITE, JOANN
Address: 10750 SPRING ST
City-St-Zip: LARGO, FL

Title: D () Delete
Name: STERN, ROBERT N
Address: 1800 KALURNA COURT
City-St-Zip: ORLANDO, FL

Title: S () Delete
Name: LANGAN, JAN,
Address: 645 S VILLA GRANDE AVE
City-St-Zip: ST PETERSBURG, FL

Title: PD () Delete
Name: CARDWELL, ROBERT M.,
Address: 7313 HIDEAWAY TRAIL
City-St-Zip: NEW PORT RICHEY, 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:

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: JOSEPH C. WHITE

CH

03/10/2004

Electronic Signature of Signing Officer or Director

_____ Date