## 2001 UNIFORM BUSINESS REPORT (UBR)

## May 01, 2001 8:00 am Secretary of State **DOCUMENT # 181966** 1. Entity Name SOUTHERN SUPPLY AND MANUFACTURING CO INC. 05-01-2001 90119 037 \*\*\*150.00 Principal Place of Business Mailing Address 1501 22ND STREET N. POST OFFICE BOX 10066 P.O. BOX 10066 ST. PETERSBURG FL 33733 PARTARA ST PETERSBURG FLA 33713 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-0725291 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name O'BRIEN, R. B., JR. Street Address (P.O. Box Number is Not Acceptable) 2720 DRIFTWOOD RD SO ST PETERSBURG FL 33705 Zip Code 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. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required whon reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS :N 11 SD TITLE ☐ Delete THEE CANDACE BERNER O'BRIEN, HELEN G NAM! 2720 DRIPTWOOD Rd.S. STREET ADDRESS 2700 DRIFTWOOD RD SO STREET ADDRESS ST. PETERSBURG, FL CITY - ST - ZIP ST PETERSBURG, FL 00000 CITY-ST-ZiP Delete TITLE Addition O'BRIEN, R.B., JR. NAME STREET ADDRESS 2720 DRIFTWOOD RD. STREET ADDRESS CITY-ST-ZIP ST. PETERSBURG FL CITY-ST-ZiP TITLE ☐ Delete SINUE ☐ Change Applifion NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-Z:P TITLE Delete TITLE ☐ Change [ ] Addition NAME STREET ADDRESS STREET ADDRESS OLTY ST-ZIP CITY-ST-ZIP ☐ Dalete TITLE Addition ☐ Chance NAME STREET ACCRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 1171.5 ☐ Delete Change THE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY ST ZIP CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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 oate; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 807. Florida Statutes; and that my name appears in 3 ock 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

STANATURE

R-18 UT CONTROL OF DEBUTED MAME OF MANING

R. B.O' BRIER, JR. 1/02/01 727 327 0757

Daytime Phone #

FILED