


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 -08:00 AM
Secretary of State

DOCUMENT # 195645	
1. Entity Name SOUTHERN INDUSTRIAL SUPPLY CORPORATION	

Principal Place of Business 2558 28TH AVENUE NORTH ST PETERSBURG, FL 33713	Mailing Address 2558 28TH AVENUE NORTH ST PETERSBURG, FL 33713
--	--



02212004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-0781658	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent ZACUR, RICHARD 5200 CENTRAL AVE. SAINT PETERSBURG, FL 33707

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when renouncing) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST HEHENBERGER, HOLLY 7880 9TH AVE S ST PETERSBURG, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP FINE, WILLIAM 11100 7TH ST EAST TREASURE ISLAND, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BRUNETTE, J. D 7963 23RD AVENUE NORTH ST. PETERSBURG, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HEHENBERGER, JACK 7880 9TH AVE N ST PETERSBURG, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP FINE, JAMES B 1359 80TH ST S. SAINT PETERSBURG, FL 33707
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

000000151375
05/04/04-80043-014 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: *[Signature]* **Jack Hehenberger** 4/29/04 727-323-1300
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #