

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 316457

**FILED**  
**Feb 16, 2011**  
**Secretary of State**

**Entity Name:** BOB DEAN SUPPLY, INC.

**Current Principal Place of Business:**

2624 HANSON STREET  
FORT MYERS, FL 339017410 US

**New Principal Place of Business:**

**Current Mailing Address:**

2624 HANSON STREET  
FORT MYERS, FL 339017410 US

**New Mailing Address:**

**FEI Number:** 59-1207774

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DEAN, ROBERT S., JR.  
2624 HANSON ST  
FORT MYERS, FL 33901 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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: DEAN, ROBERT S MR  
Address: 2624 HANSON ST  
City-St-Zip: FORT MYERS, FL

Title: STO  
Name: DEAN, KATHRYN S MRS  
Address: 2624 HANSON ST.  
City-St-Zip: FORT MYERS, FL

Title: V  
Name: SCHMIDT, ROSEMARY MS  
Address: 2624 HANSON ST.  
City-St-Zip: FORT MYERS, FL

I hereby 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 all other like empowered.

SIGNATURE: ROBERT S. DEAN

PD

02/16/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date