

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 369905

1. Entity Name
MODERN CONTROL & SUPPLY, INC.



Principal Place of Business

1500 W WASHINGTON ST
ORLANDO, FL 32805 US

Mailing Address

1500 W WASHINGTON ST
P. O. BOX 555926
ORLANDO, FL 32855-5926 US

FILED
Mar 22, 2004 08:00 AM
Secretary of State



02232004 No Chg-P CR2E034 (10/03)

4. FEI Number
59-1301484

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

HALL, SUEL M.
1125 WOODSMERE AVENUE
ORLANDO, FL 32809

**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 reinstating)

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	P
NAME	HALL, SUEL M.
STREET ADDRESS	1125 WOODSMERE AVENUE
CITY-ST-ZIP	ORLANDO, FL
TITLE	S
NAME	HALL, MINNIE LEE
STREET ADDRESS	1125 WOODSMERE AVENUE
CITY-ST-ZIP	ORLANDO, FL
TITLE	T
NAME	CLARK, TERESA A.
STREET ADDRESS	1450 DEER LAKE CR.
CITY-ST-ZIP	APOPKA, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

000000094425
03/22/04-80059-015 150.00

**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: Teresa A Clark TERESA A CLARK 3/17/04 425-8536
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR TREAS Date Daytime Phone #