

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 489524

Entity Name: GEM SUPPLY COMPANY

FILED
Aug 05, 2009
Secretary of State

Current Principal Place of Business:

1312 W. WASHINGTON STREET
ORLANDO, FL 32805

New Principal Place of Business:

Current Mailing Address:

1312 W. WASHINGTON STREET
ORLANDO, FL 32805

New Mailing Address:

FEI Number: 59-1633718

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OWENS, PAUL D.
1312 W. WASHINGTON STREET
ORLANDO, FL 32805 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: STD () Delete
Name: CROWDER, MARY O STD
Address: 633 RIDGEWOOD ST
City-St-Zip: ORLANDO, FL 32801

Title: PD () Delete
Name: OWENS, PAUL D.
Address: 718 N. LAKE FORMOSA
City-St-Zip: ORLANDO, FL 32803

Title: VD (X) Delete
Name: OWENS, MOLLY K
Address: 718 N. LAKE FORMOSA
City-St-Zip: ORLANDO, FL 32803

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: V (X) Change () Addition
Name: OWENS, PAUL D. JR
Address: 718 N. LAKE FORMOSA
City-St-Zip: ORLANDO, FL 32803

Title: P (X) Change () Addition
Name: OWENS, PAUL D. SR
Address: 718 N. LAKE FORMOSA
City-St-Zip: ORLANDO, FL 32803

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: PAUL D. OWENS, SR.

P

08/05/2009

Electronic Signature of Signing Officer or Director

Date