

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 594839

FILED
Jan 27, 2009
Secretary of State

Entity Name: CENTRAL SERVICE AND SUPPLY CO., INC.

Current Principal Place of Business:

5379 CR 122N
WILDWOOD, FL 34785

New Principal Place of Business:

4242 CR 472
OXFORD, FL 344484

Current Mailing Address:

P. O. BOX 326
OXFORD, FL 34484

New Mailing Address:

FEI Number: 59-1866884 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOWE, MARVIN E
5379 CR 122N
WILDWOOD, FL 34785 US

Name and Address of New Registered Agent:

LOWE, MARVIN E
4242 CR 472
OXFORD, FL 34484 US

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:

01/27/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: ST () Delete
Name: LOWE, MARVIN
Address: 5379 CR 122N
City-St-Zip: WILDWOOD, FL 34785

Title: P () Delete
Name: SHEPHERD, GENNY
Address: 4242 CR 472
City-St-Zip: OXFORD, FL 34484

Title: VP () Delete
Name: DUARTE, HANS
Address: 1500 SW 130TH AVE
City-St-Zip: DAVIE, FL 33325

Title: D () Delete
Name: LOWE, ALICE
Address: 5379 CR 122N
City-St-Zip: WILDWOOD, FL 34785

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: GENNY SHEPHERD

PRES

01/27/2009

Electronic Signature of Signing Officer or Director

Date