

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 649748

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Entity Name:** INTRA CHEMCIAL SUPPLY CO.

**Current Principal Place of Business:**

1611 GUNN HWY  
ODESSA, FL 33556

**New Principal Place of Business:**

10 DODECANESE BLVD  
TARPON SPRINGS, FL 34689

**Current Mailing Address:**

P O BOX 39  
TARPON SPRINGS, FL 34688

**New Mailing Address:**

**FEI Number:** 59-1965635

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HOLCOMB, VICTOR W.  
106 SOUTH TAMPANIA AVE  
SUITE 200  
TAMPA, FL 33606 US

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

HOLCOMB, VICTOR W.  
3203 W CYPRESS ST  
TAMPA, FL 33607 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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

04/29/2011

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: LOWE, MICHAEL L  
Address: 10 DODECANESE BLVD  
City-St-Zip: TARPON SPRINGS, FL 34689

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: MICHAEL L LOWE

PD

04/29/2011

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

\_\_\_\_\_  
Date