## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

CITY-ST-ZIP

SIGNATURE:

**FILED** May 01 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 **POCUMENT # F03329** (2)PENSACOLA MILL SUPPLY CO., INC. Principal Place of Business Mailing Address 3030 NORTH "E" STREET 3030 NORTH "E" STREET P O BOX 18080 P O ROX 18080 PENSACOLA FL 32505-5004 PENSACOLA FL 32506-5004 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/27/1980 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 59-1584492 21 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible Yes 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent BRINDLEY, RAYMOND 81 Name 3030 N "E" STREET Street Address (P.O. Box Number is Not Acceptable) C/O PENSACOLA MILL SUPPLY PENSACOLA FL 32501 83 City Zip Code 11. Pursuant to the provisions of Sections 607 0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, lyped or printed name of registered agent and little if applicable (NOTE Registered Agent signature required v hen reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. TITLE DELETE Change Addition KING, JAMES C NAME 1.2 NAME 3030 NORTH "E" STREET STREET ADDRESS 1.3 STREET ADDRESS PENSACOLA FL CITY-ST-7IP 1.4 CITY - ST - 7IP DELETE Change Addition TITLE 2.1 TITLE ROTH, JOEL L NAME 2.2 NAME 354 NELSON ST SW STREET ADDRESS 2.3 STREET ADDRESS ATLANTA GA 2.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE TITLE 31 TITLE Change PETRONIS, KERRY NAME 3.2 NAME 342 NELSON ST SW STREET ADDRESS 3.3 STREET ADDRESS ATLANTA GA CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Addition TITLE 4.1 TITLE Change 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 51 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE \_\_ Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** 

14. 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 annual report or supplemental annual 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 required empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attrictment with an address.

4-14-98 (404) 688-3400