

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000002307

FILED  
Feb 17, 2010  
Secretary of State

Entity Name: JOHNSTONE SUPPLY, INC.

**Current Principal Place of Business:**

11632 NE AINSWORTH CIRCLE  
PORTLAND, OR 972209016

**New Principal Place of Business:**

**Current Mailing Address:**

11632 NE AINSWORTH CIRCLE  
PORTLAND, OR 972209016

**New Mailing Address:**

FEI Number: 93-0788192

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FENNELL, CHRISTINA  
8150 FORSHEE DR.  
JACKSONVILLE, FL 32219 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P  
Name: WALLACE, DEWIGHT  
Address: 11632 NE AINSWORTH CIRCLE  
City-St-Zip: PORTLAND, OR 972209016

Title: S  
Name: MCCREARY, JANET  
Address: 11632 NE AINSWORTH CIRCLE  
City-St-Zip: PORTLAND, OR 972209016

Title: D  
Name: MEYER, DAVID  
Address: 11632 NE AINSWORTH CIRCLE  
City-St-Zip: PORTLAND, OR 972209016

Title: VC  
Name: HULL, RICK  
Address: 11632 NE AINSWORTH CIRCLE  
City-St-Zip: PORTLAND, OR 972209016

Title: C  
Name: ALEXANDER, FRANK  
Address: 11632 NE AINSWORTH CIRCLE  
City-St-Zip: PORTLAND, OR 972209016

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: JANET MCCREARY

S

02/17/2010

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

\_\_\_\_\_ Date