

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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS

FILED Jul 12, 1999 8:00 am Secretary of State

07-12-1999 90002 011 ***550.00

DOCUMENT # F94000003077

1. Corporation Name FIRST ALABAMA SUPPLY CO., INC.

Principal Place of Business 21 BROOKLANE DRIVE HUEYTOWN AL 35023

Mailing Address 721 BROOKLANE DRIVE HUEYTOWN AL 35023



DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified 06/13/1994
4. FEI Number 63-0722201
5. Certificate of Status Desired
6. Election Campaign Financing
8. This corporation owes the current year Intangible Personal Property Tax.

9. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324
10. Name and Address of New Registered Agent

1. 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Table with 2 main columns: OFFICERS AND DIRECTORS, ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Includes rows for PC BAILEY, WILLARD D JR and TSVC BAILEY, JESSIE M.

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 receiver or trustee 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 attachment with an address, with all other like empowered.

SIGNATURE: [Signature] SIGNATURE REQUIRED 7-7-99 Date Daytime Phone #

0522206

CR2E034 (1/98)