2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 12, 2008
Secretary of State

DOCUMENT# F94000003964

Entity Name: HAND SUPPLY COMPANY, INC.

Current Principal Place of Business:

PO BOX 1430
DOTHAN, AL 363021430

New Principal Place of Business:

739 S OATES STREET
DOTHAN, AL 36301

Current Mailing Address:

PO BOX 1430
DOTHAN, AL 363021430

New Mailing Address:

FEI Number: 63-0418042 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ADKINS, TOMMY
605 COMMERCE AVE
PANAMA CITY BEACH, FL 32408 US

Name and Address of New Registered Agent:

COINER, MICHAEL J MGR
7213 E 10TH STREET
PANAMA CITY, FL 32404 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: MICHAEL J. COINER 05/12/2008
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: C ( ) Delete
Name: ANDERSON, E N
Address: 400 MIDDLETON ROAD
City-St-Zip: DOTHAN, AL 36301

Title: S (X) Delete
Name: ANDERSON, CHARLOTTE
Address: 400 MIDDLETON ROAD
City-St-Zip: DOTHAN, AL 36301

Title: P (X) Delete
Name: ANDERSON, NORMAN K
Address: 212 JUNALUSKA
City-St-Zip: DOTHAN, AL 36301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition
Name: ANDERSON, NORMAN K PRES
Address: 213 SAWGRASS DRIVE
City-St-Zip: DOTHAN, AL 36303

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: NORMAN K. ANDERSON PRES 05/12/2008
Electronic Signature of Signing Officer or Director Date