

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F98000003744

FILED  
May 01, 2002 8:00 AM  
Secretary of State

**Entity Name:** BARLOWORLD INDUSTRIAL DISTRIBUTION INC.

**Current Principal Place of Business:**

11301-C GRANITE STREET  
CHARLOTTE, NC 28273

**New Principal Place of Business:**

**Current Mailing Address:**

11301-C GRANITE STREET  
CHARLOTTE, NC 28273

**New Mailing Address:**

**FEI Number:** 56-1166613

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: BROWN, KENNETH  
Address: 11301-C GRANITE STREET  
City-St-Zip: CHARLOTTE, NC

Title: D ( ) Delete  
Name: SIMMONS, SCOTT  
Address: 11301-C GRANITE STREET  
City-St-Zip: CHARLOTTE, NC 28273

Title: D ( ) Delete  
Name: SEWELL, STAN  
Address: 11301-C GRANITE STREET  
City-St-Zip: CHARLOTTE, NC

Title: STD ( ) Delete  
Name: LEWIS, MARTIN  
Address: 11301-C GRANITE STREET  
City-St-Zip: CHARLOTTE, NC

Title: VD ( ) Delete  
Name: RUSSELL, ROBERT E  
Address: 11301-C GRANITE STREET  
City-St-Zip: CHARLOTTE, NC

Title: VD ( ) Delete  
Name: HOLMES, JAMES  
Address: 11301-C GRANITE STREET  
City-St-Zip: CHARLOTTE, NC

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 for the exemption stated in Section 119.07(3)(i), 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: MARTIN LEWIS

STD

05/01/2002

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

\_\_\_\_\_  
Date