

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 22, 2002 8:00 am**  
**Secretary of State**

05-22-2002 90241 048 \*\*\*550.00

DOCUMENT # **F98000004082** *NIC #111*

1. Entity Name  
**KAUFMAN SUPPLY, INC.**  
**ATLANTIC SERVICE & SUPPLY, INC.**

Principal Place of Business  
**4825 FULTON INDUSTRIAL BLVD**  
**ATLANTA GA 30336**  
**6525 BAKER BLVD**  
**FORT WORTH, TX 76118**

Mailing Address  
**4825 FULTON INDUSTRIAL BLVD**  
**ATLANTA GA 30336**  
**6525 BAKER BLVD**  
**FORT WORTH, TX 76118**

2. Principal Place of Business  
**6525 BAKER BLVD**

3. Mailing Address  
**SAME**

Suite, Apt. #, etc.

City & State  
**FORT WORTH TX**

Zip  
**76118**

Country  
**USA**

City & State

Zip Country

4. FEI Number  
**65-0845711**

Applied For  
 Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

## 6. Name and Address of Current Registered Agent

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

## 7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐  
 (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2002 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

## 11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P. STUTH, JOHN C.</b> <b>4825 FULTON INDUSTRIAL BLVD</b> <b>ATLANTA GA 30336</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DVPT PONHAM, DANIEL</b> <b>4825 FULTON INDUSTRIAL BLVD</b> <b>ATLANTA GA 30336</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SD LOGAN, BARRY</b> <b>4825 FULTON INDUSTRIAL BLVD</b> <b>ATLANTA GA 30336</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DAT PALMESE, DANIEL</b> <b>4825 FULTON INDUSTRIAL BLVD</b> <b>ATLANTA GA 30336</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DAS MENENDEZ, ANNA</b> <b>4825 FULTON INDUSTRIAL BLVD</b> <b>ATLANTA GA 30336</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P. MARK LAZNOVSKY</b> <b>6525 BAKER BLVD</b> <b>FORT WORTH, TX 76118</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P. TREASURER FORREST CAMPBELL</b> <b>6525 BAKER BLVD</b> <b>FORT WORTH, TX 76118</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

*Forrest Campbell*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)