

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F99000003020

1. Entity Name
M M & I SUPPLY COMPANY, INCORPORATED



FILED
Sep 15, 2008 08:00 AM
Secretary of State

Principal Place of Business
13621 CHINA BERRY WAY
FORT MYERS, FL 33908

Mailing Address
13621 CHINA BERRY WAY
FORT MYERS, FL 33908



DO NOT WRITE IN THIS SPACE

07222008 No Chg-P CR2E034 (11/05)

4. FEI Number
36-4102807

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

BRINKMAN, GEORGE J
13621 CHINA BERRY WAY
FORT MYERS, FL 33908

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

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

**FILE NOW!!! FEE IS \$550.00
Due by September 12, 2008**

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

U00000959734
09/15/08-80004-015 550.00

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	BRINKMAN, PAMELA
STREET ADDRESS	13621 CHINA BERRY WAY
CITY-ST-ZIP	FORT MYERS, FL 33908
TITLE	VP
NAME	BRINKMAN, GEORGE
STREET ADDRESS	13621 CHINA BERRY WAY
CITY-ST-ZIP	FORT MYERS, FL 33908
TITLE	T
NAME	BRINKMAN, PAMELA
STREET ADDRESS	13621 CHINA BERRY WAY
CITY-ST-ZIP	FORT MYERS, FL 33908
TITLE	S
NAME	BRINKMAN, GEROGE
STREET ADDRESS	13621 CHINA BERRY WAY
CITY-ST-ZIP	FORT MYERS, FL 33908
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9-9-08 239-454981
Date Daytime Phone #