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Feb 07 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H25600 (8)

1. Corporation Name
FLORIDA INDUSTRIAL SUPPLY HOUSE INC.

Principal Place of Business

165 INDUSTRIAL LOOP
UNIT 1
ORANGE PARK FL 32073
US

Mailing Address

P.O. BOX 1469
ORANGE PARK FL 32067-1469
US



3. Date Incorporated or Qualified

10/16/1984

3a. Date of Last Report

04/17/1996

4. FEI Number

59-2455855

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 2242 FOXWOOD DRIVE

26 SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 ORANGE PARK FL

28

Zip

Country

Zip

Country

24 32073

25 USA

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

JACKSON, NANCY R.
165 INDUSTRIAL LOOP
UNIT 1
ORANGE PARK FL 32073

81 Name

NANCY R. JACKSON

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

2242 FOXWOOD DRIVE

83

84 City

ORANGE PARK

FL

85 Zip Code

32073

11. 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

Nancy R. Jackson, President

2/3/97

(Signature, typed or printed name of registered agent and fee, if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DP
NAME JACKSON, NANCY R.
STREET ADDRESS 2242 FOXWOOD DR.
CITY - ST - ZIP ORANGE PARK FL

☐ DELETE

TITLE D
NAME JACKSON, ROBERT F., SR.
STREET ADDRESS 2242 FOXWOOD DR.
CITY - ST - ZIP ORANGE PARK FL

☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

☐ Change ☐ Addition

2.1 TITLE SEC/TREAS
2.2 NAME PATRICIA A. JACKSON
2.3 STREET ADDRESS 8303 S.W. 19TH STREET
2.4 CITY - ST - ZIP N. LAUDERDALE, FL 33068

☐ Change ☒ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

☐ Change ☐ Addition

14. I do 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.

SIGNATURE:

Nancy R. Jackson, President

2/3/97 904-264-9200

(Signature and typed or printed name of signing officer or director)

DATE

DAYTIME PHONE #

CR2E034 (9/96)