FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # H53974

(2)

•	-

APPROVED AND

1997 APR 30 AM 11: 06

SECRETARY OF STATE TALLAHASSEE, FLORIDA

FLEET S	SUPPLY, INC.						8 8 8 8 8 8 8 8		
Principal Place	e of Business	Mailing Address			g obelett bjel bydd triun søkt noddit bin	I GIBLE BEREE STREET	GIBII GIBII		
1406K CAPITAL TALLAHASSEE US		1406 K CAPITAL CIRCLE N TALLAHASSEE FL 32308 — US	E 62 8 0						
		•			3. Date Incorporated or Qualified	3a. Date		Report	7
2 Principal P	lace of Business	2a, Mailing Address			04/25/1985 4. FEI Number	05/01/		pplied For	-
21	lace of Elds. 1635	26			59-1276015		h	lot Applicable	,†
		Suite, Apt. #, etc.						Additional	7
22]		27	·		5. Certificate of Status Desired		Fee R	lequired	
City & State		City & State		6. Election Campaign Financing	The state of the s			7	
23		28			Trust Fund Contribution			to Fees	4
Zφ	Country	29 3 Z 308-6 Z 80	30 Cou	intry	8. This corporation has liability for	intangible tax		s. 1 9 9.032,	
24	9, Name and Address of Curren		30		Florida Statutes 10. Name and Address of New R				-
NO	DRE, DEVOE			81 Name					1
	BK CAPITAL CIRCLE NE			82 Street Ad	ddress (P.O. Box Number is Not Accepta	blat			4
	LAHASSEE FL 32308 ~6280			62 STEEL AC	adress (P.O. Box Number is Not Accepta	Ole)			
				83					7
				84 City			85 Zip	Code	-
		· · · · · · · · · · · · · · · · · · ·				-1.	1 7 2	>>NJ.78/	뇐
11. Pursuant office or r	to the provisions of Sections 607.050 registered agent, or both, in the State)2 and 607.1508, Florida Stalute : of Florida. Such change was a	es, the øl luthorize	bove-named c d by the corpo	orporation submits this statement for the vation's board of directors. I hereby acce	purpose of ch opt the appoin	ı anging ı ı t ment a ı	its registered s registered	1
agent. Ła	m familiar with, and accept the obliga-	ations of, Section 607.0505, Flo	rida Stat	lutes.	·				
SIGNATURE	Stonature, typed or printed name of registered age	ent and little d'anglicable (NOTE	Registere	d Agent signature re	quired when reinstating)	DAYE	<u></u>		
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFI		IRECTO	RS IN 12	†ব্ল
THLE	PD	☐ DELETE	1.1 TI	TLE		L	Change	X Addition	96/6
NAME	MOORE, DEVOE L.		1.2 N	AME	~~~~~	COAC	E	A	2
THEFT ADDRESS	4352 MAYLOR ROAD		1.3 \$1	TREET ADDRESS	200 00 21 -05/02/	97011	42-	Al2 ~	ĺř
C17Y-S1-ZIP	TALLAHASSEE FL			TY-ST-ZIP		5.00 *	***1	655D)/*	⊣ ∺
TRE	VPD	☐ DELETE	2.1 TI				I Change	Test Andrich	1
NAME	MOORE, SHIRLEY M.		22 N	1					-
STREET ADDRESS	4352 MAYLOR ROAD TALLAHASSEE FL		- 1	IREET ADDRESS				22308	1
CITY - ST - ZIP	SD SD	DELETE	2. 4 U	TY-ST-ZIP] Change	Addition	
NAME	MOORE, TIFFANY	- white	3.2 N	1		•			Ì
STREET ADDRESS	4352 MAYLOR ROAD		1	TREET ADDRESS				32308	
CITY-S1-ZiP	TALLAHASSEE FL		1	aty-st-zip				3 Z3U8	
TIFLE	TD	DELETE	4.1 TI			L	Change	Addition	7
NAME	CULBERTSON, AL		4.2 N	IAME					
STREET ADDRESS	SOUP CARMINGTON UNIVE		4.3 \$	TREET ADDRESS					
CITY - ST - ZIP	TALLAHASSEE FL	Dorige		ITY-ST-ZIP			T 65	T Address	_
TITLE		☐ DELETE	5.1 Ti	1		_] Change	Addition	1
NAME CTOTAL ADDRESSES			52 N						
STREET ADDRESS				TREET ADDRESS					
CHY-ST-ZIP TITLE		☐ DELEYE	61 TI			L	Change	Addition	7
NAME			6.2 N	ì		_			
STREET ADDRESS				TREET ADDRESS					
CHTY: ST-ZiP					SCC 4-30-97 sted in Section 119.07(3)(i), Florida Statut				}
14. I do herel	by certify that the information supplie	d with this filing does not qualit	y for the	exemption sta	ated in Section 119.07(3)(i), Florida Statut	es. I further co	ertify tha	it 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 or liarn 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.

MAY NOUTH REQUIFE DUNNEYM. MOORE