2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

DOCUMENT # H84593 1. Entity Name KIMBLE SUPPLY, INC.					7 FILED				Ö
					02 JUL -2	AM 11: 44			2
					SECRETARY	OF OTATE			
Principal Place of Business Mailing Address					SECRETARY TALLAHASSE	E. FLORIDA			
5464 6TH STREET P.O. BOX 340 HIGHLAND CITY FL 33846 HIGHLAND CITY FL 33846			16						
HIGHLANU CI	IT PL 33840	HIGHLAND OIT FL 3304	ю		(ROMANAM ORDI MORRI MIDUT MIRIO I	1106 1151 91811 8 384 81	SII 91315 610	AND RESONATIONS	
		O Maria Adalasa							
2. Principal Place of Business		3. Mailing Address							
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Apt. #, etc.		DO NOT WRITE IN THIS SPACE				
City & State	9	City & State		4.	. FEI Number 59-258830	3		lied For Applicable	
Zip Country		Zip Country		5.	. Certificate of Status Desired		75 Addit		
	6. Name and Address of Current Re	egistered Agent		7.	Name and Address of New F				
			Na	ime					
KIMBLE, WILLIAM K 2901, ELIZABETH PLACE				Street Address (P.O. Box Number is Not Acceptable)					
LAKELAND FL 33813									
			Ci	City FL Zip Code					
8. The above	named entity submits this statement for t	the purpose of changing its	s registered of	fice or registered a	agent, or both, in the State of F	orida.			
SIGNATURE.	Signature, typed or printed name of registered agent and	d title if applicable. (NO	TE: Registered Ager	t signature required whe	n reinstating)	DATE			
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) FILE NOV After May 1, 2 Make Check Pay				be \$550.00	10. Election Campaign Fi Trust Fund Contribution			May Be to Fees	
11.	OFFICERS AND D		12.		 ADDITIONS/CHANGES TO OF				_
TITLE	DPT Delete		TITLE NAME		9000006223986			$-\frac{\square}{1}$ Addition	10/6
NAME STREET ADDRESS	KIMBLE, WILLIAM KENNETH 2901 ELIZABETH PLACE	STRE		DRESS	-07/05/0201070030 ****150.00 ****150.00				P2E034
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CITY-ST-ZIP			City-ST-7		110.07/0\%	12	hat the - '	form atic -	-
indicated	certify that the information supplied with it don this report or supplemental report is rooration or the receiver or trustee emport, or on an attachment with an address, w	true and accurate and that wered to execute this repo ith all other like empowere	rt as required of the control of the	oy Chapter 607, F	lorida Statutes; and that my na	ne appears in Blo	ock 11 or	Block 12 if	
010115	THE WINDS	1/5/1/5/1		6-7	6-02 86	3-64	1-8	130	

Beasley
Speed &
company, p.a.

4940 Southfork Drive Lakeland, Florida 33813

(863) 646-1373 - Fax (863) 646-8789 DENNIS E. BEASLEY certified public accountant certified valuation analyst

JERRY D. SPEED certified public accountant

June 17, 2002

Re: Kimble Supply, Inc

P. O. Box 340

Highland City, FL 33846-0340 Form: 2002 Uniform Business Report

Florida Department of State Katherine Harris Secrectary of State Division of Corporations P. O. Box 6327 Tallahassee, Florida 32314

The 2002 Uniform Business Report is enclosed with a check for \$150.00. We know that this form is being filed late but we have extenuating circumstances.

This is a small family owned corporation. During the time that this form was due to be mailed to the state, Mr. Kimble was undergoing surgery for a liver transplant. Therefore he was unable to take care of business matters. His family was concerned about his health and so this form was overlooked.

Mr Kimble is now able to work and wishes to continue the corporate family business. We are requesting that the penalty be abated because of these unusual circumstances.

Your assistance in this matter will be greatly appreciated.

Sincerely,

William K. Kimble

President

Sincerely,

Cemm 6. 6

Dennis E. Beasley, C.P.A