

DOCUMENT # J19434

DAFFIN SUPPLY COMPANY

401 W. 6TH ST.
PANAMA CITY FL 32401

PO BOX 1639
PANAMA CITY FL 32401

3. Mailing Address

Suite, Apt. #, etc.

City & State

Country

7. Name and Address of New Registered Agent

Zip Code

DATE

\$5.00 May Be
Added to Fees

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| | |
|-----------------|---|
| TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | |
| STREET ADDRESS | |
| CITY - ST - ZIP | |

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/2001
Date

Date _____

Daytime Phone # _____

CR2E034 (10/00)