FILED
Apr 30, 2004 08:00 AM
Secretary of State

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # J42974

1. Entity Name
SUPREME PAPER SUPPLIES, INCORPORATED

Principal Place of Business	Mailing Address
% CHARLES TERRELL KELLY 8967 1/2 PENSACOLA BLVD. PENSACOLA, FL 32534	% CHARLES TERRELL KELLY 8967 1/2 PENSACOLA BLVD. PENSACOLA, FL 32534

DO NOT WRITE IN THIS SPACE

04172004 No Chg-P CR2E054 (10/03)

4. FEI Number
59-2758083

Applied For / Not Applicable

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

6. Name and Address of Current Registered Agent

KELLY, CHARLES TERRELL
8967 1/2 PENSACOLA BLVD.
PENSACOLA, FL 32514

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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 ______________________________

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	KELLY, CHARLES TERRELL
STREET ADDRESS	8967 1/2 PENSACOLA BLVD
CITY-ST-ZIP	PENSACOLA, FL
TITLE	D
NAME	KELLY, BARBARA ANN
STREET ADDRESS	89 MONARCH LANE
CITY-ST-ZIP	PENSACOLA, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I 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 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.

X **SIGNATURE:** Charles T. Kelly President 4/26/04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR