

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 14, 2007 8:00 am
Secretary of State

02-14-2007 90055 017 ***158.75

DOCUMENT # J85916

1. Entity Name

INDEPENDENT CONTRACTORS SUPPLY, INC.



Principal Place of Business
5008 W. LINEBAUGH AVE
SUITE 32
TAMPA FL 33624

Mailing Address
5008 W. LINEBAUGH AVE
SUITE 32
TAMPA FL 33624



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E034 (10/06)

4. FEI Number 59-2799376

Applied For
Not Applicable

5. Certificate of Status Desired



**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HOBBS, TERENCE H
10372 CARROLLWOOD LANE
SUITE 246
TAMPA FL 33618

Name

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

City

FL

Zip Code

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

TERENCE H. HOBBS

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

2-2-2007

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P
NAME HOBBS, TERENCE H ☐ Delete
STREET ADDRESS 10372 CARROLLWOOD LANE #246
CITY ST ZIP TAMPA FL 33618

TITLE P ☒ Change ☐ Addition
NAME HOBBS, TERENCE H
STREET ADDRESS 104 TANGLEWOOD COURT
CITY ST ZIP SAFETY HARBOR FL 34695

TITLE STD ☐ Delete
NAME HOBBS, TERENCE H
STREET ADDRESS 10372 CARROLLWOOD LANE #246
CITY ST ZIP TAMPA FL 33618

TITLE STD ☒ Change ☐ Addition
NAME HOBBS, TERENCE H
STREET ADDRESS 104 TANGLEWOOD COURT
CITY ST ZIP SAFETY HARBOR FL 34695

TITLE VP ☐ Delete
NAME HOBBS, MARK A
STREET ADDRESS 10706 PRESERVE LAKE DR
CITY ST ZIP TAMPA FL 33626

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY ST ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY ST ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY ST ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY ST ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY ST ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY ST ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY ST ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

TERENCE H. HOBBS 2-2-2007 (813) 240-3107

Date

Daytime Phone #