2008 FOR PROFIT CORPORATION

FILED Mar 17, 2008 08:00 A Secretary of State

ANI	NUAL REPURI	1 5
DOCUMENT # L196 1. Entity Name COMMISSARY SUPPLY OF		
Principal Place of Business	Mailing Address	

4386 INDPENDENCE CT

SARASOTA, FL 34234 US

CR2E034 (11/05)

Fee Required

Daytime Phone #

DO NOT WRITE IN THIS SPACE

JOSEPH THE SING !	0. ==00 . (00)		
4. FEI Number		Applied For	
65-0157042		Not Applicabl	
5. Certificate of Status Desired		\$8.75 Additional	

6. Name and Address of Current Registered Agent

SHAUL, DANIEL C. 10304 SPOONHILL RD WEST BRADENTON, FL 34209

SIGNATURE:

4386 INDEPENDENCE CT

SARASOTA, FL 34234 US

DO NOT WRITE IN THIS SPACE

No Cha-P

02052000

the obligat	tions of registered agent.	,				• 1
SIGNATURE.	Signature, typed or printed name of registered agent and bite if	ANOTE: Parativ			DATE	
	Signature, types or printed mains or registered agent and little in	applicable. (NOTE: hegisten	ed Agent signature	required when reinstating)	DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Fina Trust Fund Contribution.		\$5.00 May Be Added to Fees	U00000860706 04702708-80074-014 150 0	HT:
10.	OFFICERS AND DIRECT	TORS	1	.,	<u>647 657 757 - 5677 4 - 1574 - 15</u> 77 6	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SHAUL, DANIEL C. 10304 SPOONBILL RD W BRADENTON, FL 34209					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SHAUL, DIANA R. 10304 SPOONBILL RD W BRADENTON, FL 34209					
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN T	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
12. I hereby of indicated of the corchanged,	certify that the information supplied with this filing on this report or supplemental report is filing an poration or the receiver of rustee explored or on an attachment with an address with a	no does not quality for the ex d apparate and that my signa of execute this report as requi other like empowered.	emptions contature shall have fred by Chapte	tained in Chapter 119 a the same legal effec ar 607, Florida Statute	, Florida Statutes. I further certify that the informatio t as if made under oath; that I am an officer or direct s; and that my name appears in Block 10 or Block 1	or if

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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