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Apr 28 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L59055

(8)

1. Corporation Name
C & N SUPPLY, INC.



Principal Place of Business
~~100 SOUTH 10TH STREET~~
C/O CHARLIE HYATT
~~TAMPA FL 33602~~
2402 North 35th St.
Tampa, Fl. 33605

Mailing Address
~~100 SOUTH 10TH STREET~~
C/O CHARLIE HYATT
~~TAMPA FL 33602~~
2402 North 35th St.
Tampa, Fl. 33605

3. Date Incorporated or Qualified
03/16/1990

3a. Date of Last Report
04/15/1996

2. Principal Place of Business
21 2402 North 35th St.
Suite, Apt. #, etc.
22
City & State
23 TAMPA, FL
Zip
24 33605
Country
25

2a. Mailing Address
26 2402 North 35th St.
Suite, Apt. #, etc.
27
City & State
28 TAMPA, FL
Zip
29 33605
Country
30

4. FEI Number
59-3004345

Applied For
Not Applicable

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

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent
HYATT, CHARLIE
~~100 SOUTH 10TH STREET~~ 2402 North 35th St.
~~TAMPA FL 33602~~ Tampa, Fl. 33605

10. Name and Address of New Registered Agent

81 Name

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

83

84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *Charlie C. Hyatt* CHARLIE C. HYATT 4-22-97
Signature, typed or printed name of registered agent and fee if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME HYATT, CHARLIE
STREET ADDRESS ~~100 SOUTH 10TH STREET~~ 2402 N. 35th St.
CITY-ST-ZIP TAMPA FL 33605

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Charlie C. Hyatt* CHARLIE C. HYATT 4-22-97 (813)247-3093

CR2E034 (9/96)