2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L99996

Entity Name: HUB CITY INDUSTRIAL SUPPLY, INC.

FILED Mar 09, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

BOX 3609 371 SW RING COURT LAKE CITY, FL 32056 SUITE 101

LAKE CITY, FL 32025

Current Mailing Address: New Mailing Address:

BOX 3609

LAKE CITY, FL 32056

FEI Number: 59-3025732 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MAGSTADT, MARK

RR 9 BOX 1029

ASHBY ROAD

LAKE CITY, FL 32055 US

CURRY, GABRIEL

319 SW BELMONT TERRACE

LAKE CITY, FL 32024 US

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.

SIGNATURE: GABRIEL CURRY 03/09/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition
Name: MAGSTADT, MARK, Name: CURRY, GABRIEL
Address: ROUTE 9. BOX 1029 Address: PO BOX 215

 Address:
 ROUTE 9, BOX 1029
 Address:
 PO BOX 215

 City-St-Zip:
 LAKE CITY, FL
 City-St-Zip:
 LAKE CITY, FL 32056

Title: V () Delete Title: V (X) Change () Addition

 Name:
 STEWART, SCOTT,
 Name:
 STEWART, SCOTT

 Address:
 ROUTE 9, BOX 1042
 Address:
 PO BOX 1208

 City-St-Zip:
 LAKE CITY, FL
 City-St-Zip:
 LAKE CITY, FL 32056

Title: S () Delete Title: S (X) Change () Addition

 Name:
 STEWART, PAM,
 Name:
 STEWART, PAM

 Address:
 ROUTE 9, BOX 1042
 Address:
 PO BOX 1208

 City-St-Zip:
 LAKE CITY, FL
 2056

Title: T () Delete Title: T (X) Change () Addition

 Name:
 MAGSTADT, TÁMMY,
 Name:
 KOCK, KEVIN

 Address:
 ROUTE 9, BOX 1029
 Address:
 PO BOX 2943

 City-St-Zip:
 LAKE CITY, FL
 City-St-Zip:
 LAKE CITY, FL 32056

Title: () Delete Title: V () Change (X) Addition

 Name:
 Name:
 JOHNSON, STUART

 Address:
 Address:
 PO BOX 3516

 City-St-Zip:
 City-St-Zip:
 LAKE CITY, FL 32056

Title: () Delete Title: V () Change (X) Addition

 Name:
 Name:
 JOHNSON, SHAWN

 Address:
 Address:
 PO BOX 762

 City-St-Zip:
 City-St-Zip:
 LAKE CITY, FL 32056

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KEVIN KOCK T 03/09/2006