

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # P00000053835

1. Entity Name
SUPERIOR SERVICES & SUPPLY, INC.



FILED

06 APR 20 PH 12:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
4318 B NOWLING ROAD
JAY, FL 32565

Mailing Address
4318 NOWLING ROAD
JAY, FL 32565

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04172006

Chg-P

CR2E034 (11/05)

City & State

City & State

4. FEI Number

59-3663230

Applied For

Not Applicable

Zip

Country

Zip

Country

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

BANKESTER, LARRY E
4318 NOWLING RD
JAY, FL 32565

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

Amended AR is \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete
NAME ROBINSON, MARILYN L DR
STREET ADDRESS 350 W HWY 4
CITY-ST-ZIP CENTURY, FL 32535

TITLE CEO ☐ Delete
NAME BANKESTER, LARRY E
STREET ADDRESS 4318 NOWLING RD
CITY-ST-ZIP JAY, FL 32565

TITLE VPMC ☐ Delete
NAME BANKESTER, PERRY M
STREET ADDRESS 3541 BEAGLES STREET
CITY-ST-ZIP PENSACOLA, FL 32514

TITLE OPM ☒ Delete
NAME MILLER, RICHARD
STREET ADDRESS 4318 NOWLING ROAD
CITY-ST-ZIP JAY, FL 32565

TITLE VPS ☐ Delete
NAME BANKESTER, PAULA
STREET ADDRESS 3541 BEAGLES STREET
CITY-ST-ZIP PENSACOLA, FL 32514

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☒ Addition
NAME
STREET ADDRESS 04-06-06 01015 006-35
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME 000074510570
STREET ADDRESS 05/12/06--01015--013 **26.25
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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 Chapter 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:

Larry E. Bankester
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

17 April 2006 850-232-1466

Date

Daytime Phone #