

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000007653

FILED  
Mar 28, 2009  
Secretary of State

Entity Name: ROYCE SUPPLY COMPANY

## Current Principal Place of Business:

1216 CR 621 EAST  
LAKE PLACID, FL 33852

## New Principal Place of Business:

830 US HWY 27 SOUTH  
LAKE PLACID, FL 33852 US

## Current Mailing Address:

1216 CR 621 EAST  
LAKE PLACID, FL 33852

## New Mailing Address:

830 US HWY 27 SOUTH  
LAKE PLACID, FL 33852 US

FEI Number: 03-0382765

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ROYCE, STEVEN L  
1216 CR 621 EAST  
LAKE PLACID, FL 33852 US

## Name and Address of New Registered Agent:

ROYCE, STEVEN L  
830 US HWY 27 SOUTH  
LAKE PLACID, FL 33852 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: STEVEN L ROYCE

03/28/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: ROYCE, STEVEN L  
Address: 1216 CR 621 EAST  
City-St-Zip: LAKE PLACID, FL 33852

Title: DST ( ) Delete  
Name: ROYCE, MICHELLE W  
Address: 1216 CR 621 EAST  
City-St-Zip: LAKE PLACID, FL 33852

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: ROYCE, STEVEN L  
Address: 830 US HWY 27 SOUTH  
City-St-Zip: LAKE PLACID, FL 33852 US

Title: DST (X) Change ( ) Addition  
Name: ROYCE, MICHELLE W  
Address: 830 US HWY 27 SOUTH  
City-St-Zip: LAKE PLACID, FL 33852 US

I hereby certify that the information supplied with this filing does not qualify 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: STEVEN L ROYCE

PRES

03/28/2009

Electronic Signature of Signing Officer or Director

Date