2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 11, 2009
Secretary of State

DOCUMENT# P03000058378

Entity Name: ISLAND SUPPLY COMPANY OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

LYONS BUSINESS PARK
6601 LYONS RD B-6
COCONUT CREEK, FL 33073 US

New Principal Place of Business:

Current Mailing Address:

LYONS BUSINESS PARK
6601 LYONS RD B-6
COCONUT CREEK, FL 33073 US

New Mailing Address:

FEI Number: 20-0032823 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COPROLITE CORPORATION
ONE SOUTHEAST THIRD AVENUE
SUITE 2130
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

H&R MARX
5021 NW 107TH AVE
CORAL SPRINGS, FL 33076 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: RITA MARX 03/11/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete
Name: TUFO, KENNETH
Address: 10259 SW 1ST COURT
City-St-Zip: CORAL SPRINGS, FL 33071 US

Title: VSD ( ) Delete
Name: GIVENS, IAN
Address: 17821 113TH TERRACE N
City-St-Zip: JUPITER, FL 33478 US

Title: AS ( ) Delete
Name: LOKIETZ, JON
Address: 10894 NW 71ST COURT
City-St-Zip: PARKLAND, FL 33076

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: IAN GIVENS VSD 03/11/2009
Electronic Signature of Signing Officer or Director Date