

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000078533

FILED
Oct 19, 2004
Secretary of State

Entity Name: WHOLESALE TOOL DISTRIBUTORS,"INC."

Current Principal Place of Business:

4360-B CRAWFORDVILLE HWY.
CRAWFORDVILLE, FLORIDA, 32327 US

New Principal Place of Business:

4360 CRAWFORDVILLE HWY.
SUITE B
CRAWFORDVILLE, FLORIDA, FL 32327 US

Current Mailing Address:

4360-B CRAWFORDVILLE HWY.
CRAWFORDVILLE, FLORIDA, 32327 US

New Mailing Address:

4360 CRAWFORDVILLE HWY.
SUITE B
CRAWFORDVILLE, FLORIDA, FL 32327 US

FEI Number: 20-0094392

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLER, RICHARD A
4360-B CRAWFORDVILLE HWY
CRAWFORDVILLE, FL 32327 US

Name and Address of New Registered Agent:

MILLER, RICHARD A
4360 CRAWFORDVILLE HWY
SUITE B
CRAWFORDVILLE, FL 32327 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: RICHARD A MILLER

10/19/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P.T () Delete
Name: MILLER, RICHARD A
Address: 4360-B CRAWFORDVILLE HWY
City-St-Zip: CRAWFORDVILLE, FL 32327 US

Title: VP,S () Delete
Name: MILLER, SHARLYNE
Address: 4360-B CRAWFORDVILLE HWY
City-St-Zip: CRAWFORDVILLE, FL 32326 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P.T (X) Change () Addition
Name: MILLER, RICHARD A
Address: 4360 CRAWFORDVILLE HWY SUITE B
City-St-Zip: CRAWFORDVILLE, FL 32327 US

Title: VP,S (X) Change () Addition
Name: MILLER, SHARLYNE
Address: 4360 CRAWFORDVILLE HWY SUITE B
City-St-Zip: CRAWFORDVILLE, FL 32326 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: RICHARD A MILLER

P T

10/19/2004

Electronic Signature of Signing Officer or Director

Date