


2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 08, 2008 08:00 AM
Secretary of State

DOCUMENT # P05000044203																																																																																																														
1. Entity Name EF SUPPLY, CORP.																																																																																																														
Principal Place of Business 1605 HARBOR DRIVE MARATHON FL 33050 US		Mailing Address 1605 HARBOR DRIVE MARATHON FL 33050 US																																																																																																												
2. Principal Place of Business - No P.O. Box #		3. Mailing Address																																																																																																												
Suite, Apt. #, etc.		Suite, Apt. #, etc.																																																																																																												
City & State		City & State																																																																																																												
Zip	Country	Zip	Country																																																																																																											
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent																																																																																																												
A1A REGISTERED AGENT INC. 92 SADBERRY ROAD QUINCY FL 32351		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>																																																																																																														
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee Will Be \$550.00 Make Check Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																																																																																																												
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11																																																																																																												
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1st MOORE CR2E034 (10/07)

4. FEI Number **20-2659240** Applied For Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:  **BONNIE JEAN CUCCHI** **Feb 08**