

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000062633

FILED
Mar 02, 2009
Secretary of State

Entity Name: INLAND BLOCK AND SUPPLY, INC.

Current Principal Place of Business:

1601 RONALD REAGAN BLVD.
LONGWOOD, FL 32750

New Principal Place of Business:

275 BENSON JUNCTION RD.
DEBARY, FL 32713

Current Mailing Address:

P. O. BOX 180158
CASSELBERRY, FL 32718

New Mailing Address:

FEI Number: 51-0544414 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MURPHY, VINCENT R
1601 COUNTY ROAD 427
CASSELBERRY, FL 32707 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MURPHY, VINCENT R
Address: P.O. BOX 180158
City-St-Zip: CASSELBERRY, FL 327180158

Title: VP () Delete
Name: MURPHY, GREGORY J
Address: P.O. BOX 180158
City-St-Zip: CASSELBERRY, FL 327180158

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: VINCENT R. MURPHY

PT

03/02/2009

Electronic Signature of Signing Officer or Director

_____ Date