

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 21, 2003 8:00 am
Secretary of State

02-21-2003 90209 009 ***150.00

DOCUMENT # P20983

1. Entity Name
EMPIRE WHOLESALE LUMBER CO.



Principal Place of Business
2803 W. BUSCH BLVD.
SUITE 104
TAMPA FL 33618

Mailing Address
P.O. BOX 249
AKRON OH 44309-0249
US



2. Principal Place of Business

3. Mailing Address

P.O. Box 1248

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
Bath, OH

Zip

Country

Zip
44210-1248

Country

Summit

4. FEI Number 34-0702423

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

PATNEAUDE, MICHAEL R
2803 WEST BUSCH BLVD
SUITE 104
TAMPA FL 33618

7. Name and Address of New Registered Agent

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GRAVES, J. HARVEY 525 ST. ANDREWS DR. AKRON OH	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD GRAVES, PATRICIA L. 525 ST. ANDREWS DR. AKRON OH	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD CARROLL, PETER A. 313 TIMBER RIDGE CUYAHOGA FALLS OH	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GRAVES, JOHN H., JR. 1346 VILLAGE DR AKRON OH	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GRAVES, MARY ANN 6716 HURSEY ST DALLAS TX	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HAWK, DIANNE L. 3404 SHENANDOAH ST DALLAS TX	<input checked="" type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Chairman	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President/Secretary	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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:

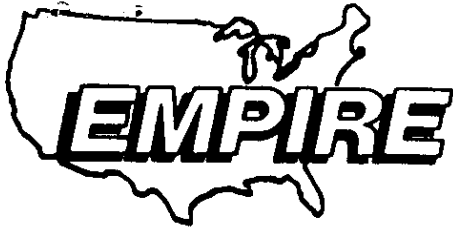
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/18/03 330-665-7800

Date

Daytime Phone #

CR2E034 (10/02)



70017842 Attachmen +
P20983
EMPIRE WHOLESALE LUMBER CO.

P.O. BOX 1248 • BATH, OHIO 44210-1248

www.empirewholesale.com

TELEPHONE
330-665-7800

FAX
330-665-7888

Direct-Mill Carload & Truckload Wholesalers, Serving 48 States With Forest Products

WE HAVE MOVED!

EFFECTIVE JANUARY 20, 2003:

OUR NEW PHONE NUMBERS ARE:

PH: 330-665-7800

FAX: 330-665-7888

OUR NEW MAILING ADDRESS IS:

EMPIRE WHOLESALE LUMBER COMPANY

P O BOX 1248

BATH, OH 44210-1248

OUR NEW STREET ADDRESS IS:

EMPIRE WHOLESALE LUMBER COMPANY

3677 EMBASSY PARKWAY

AKRON, OH 44333-8382

CORPORATE HEADQUARTERS AKRON, OHIO



BRANCH
OFFICES

RELOAD
DISTRIBUTION

OKEMOS, MICHIGAN
BEDFORD, NEW HAMPSHIRE

NIAGARA FALLS, ONTARIO
WINDSOR, ONTARIO
COATICOOK, QUEBEC
CHICAGO, ILLINOIS

TAYLORS, SOUTH CAROLINA
NAPERVILLE, ILLINOIS
LA PRAIRIE, QUEBEC

MINNEAPOLIS, MINNESOTA
ISLAND POND, VERMONT
GAINESVILLE, VIRGINIA
BALTIMORE, MARYLAND

TAMPA, FLORIDA
CLARKSVILLE, INDIANA

LOUISVILLE, KENTUCKY
KNOXVILLE, TENNESSEE
INDIANAPOLIS, INDIANA
ATLANTA, GEORGIA

N · A · W

NATIONAL ASSOCIATION OF
WHOLESALE DISTRIBUTORS