

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P92000006761 (0)

1. Corporation Name:

PHIL-MOR SUPPLY INC.

FILED  
Mar 20 1997 8:00am  
Secretary of State



Principal Place of Business

6260 TERRA ROSA CIR  
BOYNTON BCH FL 33437  
US

Mailing Address

6260 TERRA ROSA CIR  
BOYNTON BCH FL 33437-5140  
US

2. Principal Place of Business

21 Suite, Apt. #, etc.

2a. Mailing Address

26 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

27 City & State

28 Zip

29 Country

9. Name and Address of Current Registered Agent

O'REILLY, SHARON A  
9043 CHRYSANTHENUM DRIVE  
BOYNTON BEACH FL 33437

3. Date Incorporated or Qualified 11/20/1992	3a. Date of Last Report 03/14/1996
4. FEI Number 65-0377131	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
10. Name and Address of New Registered Agent	
61 Name	81 Name
62 Street Address (P.O. Box Number is Not Acceptable)	82 Street Address (P.O. Box Number is Not Acceptable)
63	83
64 City	84 City
FL	85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature Type: (For printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
12.1 TITLE VPT NAME O'REILLY, SHARON A STREET ADDRESS 9043 CHRYSANTHENUM DRIVE BOYNTON BCH FL CITY-ST-ZIP PS	13.1 TITLE VPT/D 13.2 NAME 13.3 STREET ADDRESS 13.4 CITY-ST-ZIP	13.5 Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/>
12.2 TITLE NAME COLLIE, DONNA M STREET ADDRESS 6260 TERRA ROSA CIRCLE BOYNTON BEACH FL CITY-ST-ZIP	13.21 TITLE P/S/D 13.22 NAME 13.23 STREET ADDRESS 13.24 CITY-ST-ZIP	13.5 Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/>
12.3 TITLE NAME STREET ADDRESS CITY-ST-ZIP	13.31 TITLE 31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP	13.5 Change <input type="checkbox"/> Addition <input type="checkbox"/>
12.4 TITLE NAME STREET ADDRESS CITY-ST-ZIP	13.41 TITLE 41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP	13.5 Change <input type="checkbox"/> Addition <input type="checkbox"/>
12.5 TITLE NAME STREET ADDRESS CITY-ST-ZIP	13.51 TITLE 51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP	13.5 Change <input type="checkbox"/> Addition <input type="checkbox"/>
12.6 TITLE NAME STREET ADDRESS CITY-ST-ZIP	13.61 TITLE 61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP	13.5 Change <input type="checkbox"/> Addition <input type="checkbox"/>

CR2E034 (9/96)

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Donna M. Collie Pres.*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Donna M. Collie  
President*

1/17/97

305-628-1890

Daytime Phone #