

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR 27 AM 9:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000005993 (9)

1. Corporation Name

GENERAL SUPPLY CORPORATION

Principal Place of Business

140 INTRACOSTAL POINTE DRIVE
SUITE 201
JUPITER FL 33477

Mailing Address

140 INTRACOSTAL POINTE DRIVE
SUITE 201
JUPITER FL 33477

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

01/26/1993

3a. Date of Last Report

06/01/1994

4. FEI Number

65-0385775

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

5. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21 6300 RIDGELEA PL.

2a. Mailing Address

26 P.O. BOX 122269

Suite, Apt., etc.

Suite, Apt., etc.

22 1208

27

City & State

23 FORT WORTH TX

City & State

28 FORT WORTH TX

24 76116

25 USA

29 76121

30 USA

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 S PINE ISLAND RD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

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 typed or printed name of registered agent and the corporation

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY ST ZIP
D	FRASER, CLARK	N/A	FT WORTH TX
D	MEEKS, DANA	P.O. BOX 122269 N/A FORT WORTH, TX 76121	FT WORTH TX
D	VALENTINE, GENEVIEVE	P.O. BOX 122269 N/A FORT WORTH, TX 76121	FT WORTH TX
D	DAVIS, WILLIAM	P.O. BOX 122269 N/A FORT WORTH, TX 76121	FT WORTH TX
D	SWAYZE, W S	3131 MCKINNEY AVE SUITE 700 DALLAS TX 75204-2471	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	12 NAME	13 STREET ADDRESS	14 CITY ST ZIP
☒ Change ☐ Addition	REMOVE		
☒ Change ☐ Addition	T/D		
☐ Change ☐ Addition			
☒ Change ☐ Addition	P/D		
☐ Change ☐ Addition			
☐ Change ☒ Addition	V/S NORM R. THOENNES N/A FORT WORTH, TX P.O. BOX 122269 FORT WORTH, TX 76121		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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:

Norm R. Thoenness
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
NORM R. THOENNES, VICE PRESIDENT

2/24/95 (817)
737-6678
Date Daytime Phone