

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 02, 2005 8:00 am
Secretary of State

02-02-2005 90049 020 ***150.00

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1. Entity Name

S.P.S. DISTRIBUTORS, INC.



Principal Place of Business

PO BOX 1177
JENSEN BEACH FL 34958
US

Mailing Address

PO BOX 1177
JENSEN BEACH FL 34958
US

40011231



1st MOORE CR2E034 (10/04)

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-3174165

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

TIMON, GAY
657 W DIXIE HIGHWAY
JENSEN BEACH FL 34957

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, 2005 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 D - Vice President ☐ Delete
NAME JOHNSTON, NANCY
STREET ADDRESS 1005 SUMNER STREET
CITY-ST-ZIP JENSEN BEACH FL 34957

TITLE D - Sec ☐ Delete
NAME PAWLAK, CHERI
STREET ADDRESS 1005 SUMNER STREET
CITY-ST-ZIP JENSEN BEACH FL 34957

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE President ☐ Change ☒ Addition
NAME GAY Timon
STREET ADDRESS PO Box 1177
CITY-ST-ZIP JENSEN BEACH, FL 34958

TITLE Vice President ☐ Change ☒ Addition
NAME George S. Grose
STREET ADDRESS PO Box 1177
CITY-ST-ZIP JENSEN BEACH, FL 34958

TITLE Director/Vice President ☒ Change ☐ Addition
NAME NANCY JOHNSTON
STREET ADDRESS PO Box 1664
CITY-ST-ZIP JENSEN BEACH, FL 34958

TITLE Director/Sec ☒ Change ☐ Addition
NAME CHERI M PAWLAK
STREET ADDRESS PO Box 1664
CITY-ST-ZIP JENSEN BEACH, FL 34958

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Nancy Johnston VP
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/25/05