FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT 1996

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

DOCUMENT # P93000030593 (6)

1. Corporation Name

SOUTH COUNTRY SUPPLY, INC.

Principal Place of Business	Mailing Address
9220 LAWRENCE ROAD BOYNTON BEACH FL 33436	9220 LAWRENCE ROAD BOYNTON BEACH FL 33436

3. Date Incorporated or Qualified 04/23/1993	**3a.** Date of Last Report 06/12/1995

2. Principal Place of Business [21]	2a. Mailing Address [26]	**4.** FEI Number 65-0437206	Applied For / Not Applicable
Suite, Apt. #, etc. [22]	Suite, Apt. #, etc. [27]	**5.** Certificate of Status Desired ☐	**$8.75** Additional Fee Required
City & State [23]	City & State [28]	**6.** Election Campaign Financing Trust Fund Contribution ☐	**$5.00** May Be Added to Fees
Zip [24]	Country [25]	Zip [29]	Country [30]

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

9. Name and Address of Current Registered Agent	**10.** Name and Address of New Registered Agent
BEACH, WAYNE G 9220 LAWRENCE ROAD BOYNTON BEACH FL 33436	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 if the change was (NOTE: Registered Agent signature is required when changing) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: P	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME: BEACH, WAYNE		1.2 NAME	
STREET ADDRESS: 9220 LAWRENCE RD.		1.3 STREET ADDRESS	
CITY-ST-ZIP: BOYNTON BCH. FL		1.4 CITY-ST-ZIP	
TITLE:	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME:		2.2 NAME	
STREET ADDRESS:		2.3 STREET ADDRESS	
CITY-ST-ZIP:		2.4 CITY-ST-ZIP	
TITLE:	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME:		3.2 NAME	
STREET ADDRESS:		3.3 STREET ADDRESS	
CITY-ST-ZIP:		3.4 CITY-ST-ZIP	
TITLE:	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME:		4.2 NAME	
STREET ADDRESS:		4.3 STREET ADDRESS	
CITY-ST-ZIP:		4.4 CITY-ST-ZIP	
TITLE:	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME:		5.2 NAME	
STREET ADDRESS:		5.3 STREET ADDRESS	
CITY-ST-ZIP:		5.4 CITY-ST-ZIP	
TITLE:	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME:		6.2 NAME	
STREET ADDRESS:		6.3 STREET ADDRESS	
CITY-ST-ZIP:		6.4 CITY-ST-ZIP	

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 119.07(3)(k), 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: ✓ *Wayne G. Beach*   4/19/96   407-738-2599

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)