## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P95000017641

FILED Apr 27, 2007 Secretary of State

Entity Name: EXCEL SUPPLY, INC. **Current Principal Place of Business: New Principal Place of Business:** 655 W. FULTON ST. SUITE 3 SANFORD, FL 32771 **New Mailing Address: Current Mailing Address:** P.O. BOX 182011 CASSELBERRY, FL 32718 FEI Number: 59-3301752 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WALTER, DAVID A WALTER, DAVID A 655 W. FÚLTON ST. P.O. BOX 182011 CASSELBERRY, FL 32718 SANFORD, FL 32771 US US 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. SIGNATURE: DAVID A. WALTER 04/27/2007 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition SIMON, PHILIP Name: Name: 655 W. FULTON ST. Address: Address: City-St-Zip: SANFORD, FL 32771 City-St-Zip: ( ) Delete Title: VPT Title: () Change () Addition Name: WALTER, DAVID A Name: 655 W. FULTON ST. Address: Address: SANFORD, FL 32771 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

Ρ SIGNATURE: PHILIP SIMON 04/27/2007