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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000032359 (8)

102 SUPPLY DEPOT, INC.

FILED Mar 26 1998 8:00am Secretary of State

Principal Plac 79880 S. MAI MEMPHIS MI	IN STREET	Mailing Address 79880 S. MAIN STREET MEMPHIS MI 48041-4838	_				J (B) INE
					DO NOT WRITE IN THIS	SPACE	
					 Date Incorporated or Qualified 04/21/1995 		
	lace of Business	2a. Mailing Address			4. FEI Number	Apr	olied For
21 26					58-2171404	Not	Applicable
Suite, Apt.	#, etc	Suite, Apt. #, etc.	te, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 A	
City & State City & State					6. Election Campaign Financing	\$5.00	
28					Trust Fund Contribution	Added to	
Zip	Country Zip Cour			y	8. This corporation owes or has paid the co	urrent year Inta	ngible
24	25	29	30		Personal Property Tax due June 30.		No
	9, Name and Address of Currer	t Registered Agent	81	T ::	10. Name and Address of New Registered	Agent	
3131 - BATH STREET MORTH STE A							
ST. PETERSBURG FL 33710			82	Street Ac	dress (P.O. Box Number is Not Acceptable)		
			83				
			84	City	F	85 Zip C	ode
11. Pursuant	to the provisions of Sections 607,050	2 and 607 1508. Florida Statu	tes, the abov	e-named co	progration submits this statement for the nurnose	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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.							
Ĭ	and the state of the congress	anona or, occaon cor .0000, 11	onda olaidie	ο.			j
SIGNATURE	Signature, typed or printed name of registered age	ot and title if applicable (NO	E Registered Ag	ent signature rec	guired when reinstating) DATE		—— I,
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS	IN 12
TITLE			1.1 TITLE			Change	Addition \
NAME	DUHAIME, ANDREW H		1.2 NAME				
STREET ADDRESS 79880 S. MAIN STREET			1.3 STREET ADDRESS				إ
CITY-ST-ZIP			1.4 CITY-	ST-ZIP	***************************************		}
TITLE	ADATA DODGOT I		2.1 TITLE			Change	Addition C
NAME	70000 C MAIN CTOCKT		2.2 NAME				
STREET ADDRESS	MEMPHIS MI 48041-4638			TADDRESS			
CITY-ST-ZIP TITLE	WIEM 1 100 101 100 11 1000	DELETE	2. 4 City- 3.1 Title	ST-ZIP	The second secon	☐ Change	Addition
NAME			3.1 TILE 3.2 NAME	1		☐ change	- Nodition
STREET ADDRESS			4	T ADDRESS			
CITY-ST-ZIP			3.4. CITY-				
TITLE		☐ DELETE	4.1 TITLE	31-2#	· · · · · · · · · · · · · · · · · · ·	Change	Addition
NAME			4. 2 NAME			_ ,	
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP			4.4 CITY-				
TITLE		DELETE	5.1 TITLE			Change	Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREE	T ADDRESS			•
CITY-ST-ZIP			5.4 CITY-	ST-ZIP			
TITLE		DELETE	6.1 TITLE			Change	Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREE	T ADDRESS			
CITY - ST - ZIP			6.4 CITY-	ST-ZIP			

s filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information hal report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an prustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in