

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 17, 2003 8:00 am**  
**Secretary of State**

03-17-2003 90145 021 \*\*\*150.00

**DOCUMENT # P95000058572**

1. Entity Name  
**INDUSTRIAL SUPPLY OF LAKELAND, INC.**



Principal Place of Business  
**718 ROYAL GLEN DRIVE  
LAKELAND FL 33813**

Mailing Address  
**718 ROYAL GLEN DRIVE  
LAKELAND FL 33813**



2. Principal Place of Business  
**1221 Easton Drive**  
Suite, Apt. #, etc.

3. Mailing Address  
**1221 Easton Drive**  
Suite, Apt. #, etc.

City & State  
**Lakeland FL**  
Zip  
**33803**  
Country  
**USA**

City & State  
**Lakeland FL**  
Zip  
**33803**  
Country  
**USA**

4. FEI Number  
**59-3333350**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

☒ CHECK HERE IF MAKING CHANGES

## 6. Name and Address of Current Registered Agent

**BLONDELL, DONALD K  
718 ROYAL GLEN DRIVE  
LAKELAND FL 33813**

## 7. Name and Address of New Registered Agent

Name  
**Donald K. Blondell**  
Street Address (P.O. Box Number is Not Acceptable)  
**1221 Easton Drive**  
City  
**Lakeland FL** Zip Code  
**33803**

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 *Donald K. Blondell* **Donald K Blondell** **3-13-03**  
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, 2003 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 NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>BLONDELL, DONALD K</b> <b>718 ROYAL GLEN DRIVE</b> <b>LAKELAND FL 33813</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S</b> <b>BLONDELL, KAREN L</b> <b>718 ROYAL GLEN DR</b> <b>LAKELAND FL</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>Donald K. Blondell</b> <b>1221 Easton Drive</b> <b>Lakeland, FL 33803</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S</b> <b>Karen L. Blondell</b> <b>1221 Easton Drive</b> <b>Lakeland, FL 33803</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *Donald K. Blondell* **Donald K Blondell** **3-13-03** **863-688-0350**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)