2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 04, 2008
Secretary of State

DOCUMENT# P96000104388

Entity Name: COMMERCIAL SUPPLIES AND SALVAGE, INC.

Current Principal Place of Business:

3955 W. NAVY BLVD
PENSACOLA, FL 32507

New Principal Place of Business:

Current Mailing Address:

3955 W. NAVY BLVD
PENSACOLA, FL 32507

New Mailing Address:

FEI Number: 59-3418793 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

FOSTER, BILLY D
3955 W. NAVY BLVD
PENSACOLA, FL 32507 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: FOSTER, BILLY D
Address: 7896 BAY MEADOWS DR
City-St-Zip: PENSACOLA, FL

Title: ST ( ) Delete
Name: FOSTER, PAULINE W
Address: 7896 BAY MEADOWS DR
City-St-Zip: PENSACOLA, FL

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VP ( ) Change (X) Addition
Name: FOSTER, LATRICIA J
Address: 7198 WYMART ROAD
City-St-Zip: PENSACOLA, FL 32526 US

Title: VP ( ) Change (X) Addition
Name: RIDDLES, PAUL D
Address: 4595 DURHAM DR
City-St-Zip: PENSACOLA, FL 32526 US

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.

SIGNATURE: BILLY D. FOSTER P 01/04/2008

Electronic Signature of Signing Officer or Director — Date