SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name P97000027240 (5)

BELL & SON SUPPLY, INC.

STREET ADDRESS

CITY-ST-ZIP

Principal Plac	ce of Business	Mailing Address	·	· · · · · · · · · · · · · · · · · · ·		
2204 2ND STREET, N.E. WINTER HAVEN FL 33881		2204 2ND STREET, N.E. WINTER HAVEN FL 33881				
				DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified	
		, , , , , , , ,			03/21/1997	
2. Principal Place of Business 2a. Mailing Address		1 1			4. FEI Number	Applied For
Suite, Apt. #. etc.		26			59-3144301	Not Applicable
		Suite, Apt. #, etc.	, Apr. W. Bic.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
		Cilv & State	Cily & State		& Floriton Community Files view	.
					6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country		Zip Country		itry		
24 25		29 30		•	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. X Yes	
	9. Name and Address of Currer				10. Name and Address of New Registered	Agent
TUR	INER, MARK G ESQ.			81 Name		
255 MAGNOLIA AVE. S.W.				82 Street A	et Address (P.O. Box Number is Not Acceptable)	
WINTER HAVEN FL 33880					,	
				83		
				84 City	EI	85 Zip Code
office or	it to the provisions of sections 607.050 registered agent, or both, in the State am familiar with, and accept the oblig	of Florida. Such change was au	thorized	by the corpo	rporation submits this statement for the purpose of c ration's board of directors. I hereby accept the appo	hanging its registered intment as registered
	Signature, typed or printed name of registured agos		E Registere	d Agent signature	required when reinstating) DATE	
12.	T	D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	D CIDATEN I	L] DELETE	1.1 TITL			Change Addition
NAME	BELL, SIDNEY J		1.2 NAN	1		
STREET ADDRESS	2204 2ND STREET N.E. WINTER HAVEN FL 33881			EET ADDRESS		
CITY-ST-ZIP TITLE	D	Document	2.1 TITL	(-ST-ZIP	· · · · · · · · · · · · · · · · · · ·	
NAME	BELL, GARY J	L_] DELETE	2.2 NAN			Change Addition
STREET ADDRESS	2204 2ND STREET N.E.			EET ADDRESS		
CITY-ST-ZIP	WINTER HAVEN FL 33881		2.4 CITY			
TITLE		DELETE	3.1 TITL	·————		Change Addition
NAME		- u	3.2 NAN	iE i		onengo [nuonon
STREET ADDRESS			3.3 S1R	EET ADDRESS		Ţ
CITY-ST-ZIP			3.4 CITY	-S1-ZIP		
TITLE		[] DELETE	4.1 TITL	E		Change Addition
NAME			4.2 NAM	E		
STREET ADDRESS			4.3 STRI	ET ADDRESS		
CITY-ST-ZIP			4.4 CITY			
TITLE		DELETE	5.1 TITU			Change Addition
NAME			5.2 NAM			
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	5.4 CITY			
TITLE		L DELETE	61TITL	F		Change Addition

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 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 organ attactment with an address.

FILED

Sep 30 1998 8:00am

Secretary of State