

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000089150

Entity Name: BARRETT SUPPLY, INC.

FILED
Apr 17, 2009
Secretary of State

Current Principal Place of Business:

8110 CYPRESS PLAZA DR
SUITE 101
JACKSONVILLE, FL 32256

New Principal Place of Business:

Current Mailing Address:

8110 CYPRESS PLAZA DR
SUITE 101
JACKSONVILLE, FL 32256

New Mailing Address:

FEI Number: 59-3484023

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOLBROOK, H LEON III
ONE INDEPENDENT DRIVE
SUITE 2301
JACKSONVILLE, FL 32202 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: VP () Delete
Name: HUSTUS, TRISHA
Address: 6661 ORIOLE AVE
City-St-Zip: JACKSONVILLE, FL 32216

Title: T () Delete
Name: BARRETT, ANDREW
Address: 25734 ALDUS DRIVE
City-St-Zip: LAND O' LAKES, FL 34639

Title: P () Delete
Name: BARRETT, WALTER L
Address: 8571 ROYAL WOOD DRIVE
City-St-Zip: JACKSONVILLE, FL 32256

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: () Change () Addition
Name:
Address:
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.

SIGNATURE: TRISHA HUSTUS

VP

04/17/2009

Electronic Signature of Signing Officer or Director

Date