

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P97000089150

Entity Name: BARRETT SUPPLY, INC.

**FILED**  
**Jan 06, 2012**  
**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

**OFFICERS AND DIRECTORS:**

Title: VP  
Name: HUSTUS, TRISHA  
Address: 6661 ORIOLE AVE  
City-St-Zip: JACKSONVILLE, FL 32216

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

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

I hereby 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 all other like empowered.

SIGNATURE: TRISHA HUSTUS

VP

01/06/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date