

**PROFIT CORPORATION
ANNUAL REPORT
1999**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000042184 ✓
1. Corporation Name
SOUTH EAST SUPPLY COMPANY OF CENTRAL FLORIDA, IN C.

Principal Place of Business
137 SKYRIDGE DR.
DELAND FL 32724

Mailing Address
1437 SKYRIDGE DR.
DELAND FL 32724

FILED
CLERK OF STATE
DIVISION OF CORPORATIONS
99 JUL 23 PM 3:11



DO NOT WRITE IN THIS SPACE

Principal Place of Business 184 S. Center St. Suite, Apt. #, etc.	2a. Mailing Address Same P.O. Box 780 Suite, Apt. #, etc.
City & State Pierson, FL Zip 32180 Country U.S.A.	2b. City & State Pierson, FL Zip 32180 Country U.S.A.

3. Date Incorporated or Qualified 05/07/1998	4. FEI Number 59-3510090	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
8. This corporation owes the current year Intangible Personal Property. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

JONES, MARTIN
1437 SKYRIDGE DR.
DELAND FL 32724

81. Name	
82. Street Address (P.O. Box Number is Not Acceptable)	
83.	
84. City	FL 85. Zip Code

Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

NATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

ADDRESS	DELETE	1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	Change	Addition
President Bonnie A. Jones 445 E. Minshew Rd. Pierson, FL 32180	<input type="checkbox"/>						
Vice President Martin A. Jones 1437 Skyridge Dr. DeLand, FL 32724	<input type="checkbox"/>						
	<input type="checkbox"/>						
	<input type="checkbox"/>						
	<input type="checkbox"/>						
	<input type="checkbox"/>						
	<input type="checkbox"/>						
	<input type="checkbox"/>						

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 called 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 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 on an attachment with an address.

SIGNATURE:

Martin A. Jones Martin A. Jones

7/2/99

(904) 734-3332

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/99)

South East Supply Co. of Central Florida, Inc.

Licensed & Insured

904-734-3332
1-877-4FENCING

2484 E. International Speedway Boulevard
DeLand, Florida 32724

Fax 904-734-3114
E-mail: Martin@sesupply.com

Dear Division of Corporation,

On Friday, July 2, 1999, I spoke with Shawn ^{Town} at the number listed on the Annual Report. He advised me to write you a letter explaining that I did not receive the first notice. Our office has been between secretaries for some time now, and we have had temporary workers. There have been several forms either misplaced or we simply did not receive them. However, I am enclosing \$150.00 to file our Annual Report per Shawn's advice. If you have any questions please contact me at one of the above phone numbers.

Sincerely,



Kerrie Jones