

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000108192

FILED  
Apr 26, 2004  
Secretary of State

Entity Name: DMS SUPPLY, INCORPORATED

## Current Principal Place of Business:

1232 ROCK SPRINGS RD #4  
#14  
APOPKA, FL 32712

## New Principal Place of Business:

7 W. MAIN STREET  
#800  
APOPKA, FL 32704

## Current Mailing Address:

1232 ROCK SPRINGS RD #4  
#14  
APOPKA, FL 32712

## New Mailing Address:

POST OFFICE BOX 1582  
APOPKA, FL 32704

FEI Number: 59-3550396

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JOHNSON, SABINA  
4513 PONKAN ROAD  
APOPKA, FL 32712

## 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: DP ( ) Delete  
Name: JOHNSON, SABINA  
Address: 4513 PONKAN ROAD  
City-St-Zip: APOPKA, FL 32712

Title: DV ( ) Delete  
Name: FOREMAN, MEEKS  
Address: 420 KILLARNEY BAY CT  
City-St-Zip: WINTER PARK, FL 32789

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 for the exemption stated in Section 119.07(3)(i), 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: SABINA JOHNSON

DP

04/26/2004

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

\_\_\_\_\_  
Date