

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000019568

FILED  
Mar 10, 2004  
Secretary of State

**Entity Name:** CASTLE SUPPLY COMPANY OF TARPON SPRINGS, INC.

**Current Principal Place of Business:**

41916 US HWY 19 N  
TARPON SPRINGS, FL 34689

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 357  
PINELLAS PARK, FL 33780

**New Mailing Address:**

**FEI Number:** 52-2153659

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WHITE, JOSEPH C  
P.O. BOX 357  
PINELLAS PARK, FL 33780 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: CH ( ) Delete  
Name: WHITE, JOSEPH C  
Address: 10750 SPRING ST  
City-St-Zip: LARGO, FL 33774

Title: P ( ) Delete  
Name: CARDWELL, ROBERT  
Address: 1932 WINSLOE DRIVE  
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: ST ( ) Delete  
Name: BECHTOLD, ROBIN  
Address: 13109 RIDGE RD  
City-St-Zip: LARGO, FL 33778

**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 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: JOSEPH C. WHITE

CH

03/10/2004

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

\_\_\_\_\_  
Date