

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# V65054

FILED
Oct 05, 2007
Secretary of State

Entity Name: HOTEL SUPPLY COMPANY

Current Principal Place of Business:

570 S. TRIPLET LAKE DR.
CASSELBERRY, FL 32707

New Principal Place of Business:

1173 KERSFIELD CIRCLE
LAKE MARY, FL 32746

Current Mailing Address:

570 S. TRIPLET LAKE DR.
CASSELBERRY, FL 32707

New Mailing Address:

1173 KERSFIELD CIRCLE
LAKE MARY, FL 32746

FEI Number: 59-3142077

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FULLER, BARBARA
570 SOUTH TRIPLET LAKE DRIVE
CASSELBERRY, FL 32707 US

Name and Address of New Registered Agent:

FULLER, BARBARA
1173 KERSFIELD CIRCLE
LAKE MARY, FL 32746 US

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: BARBARA FULLER

10/05/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPST () Delete
Name: FULLER, BARBARA,
Address: 570 S. TRIPLET LAKE DR.
City-St-Zip: CASSELBERRY, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change () Addition
Name: FULLER, BARBARA M
Address: 1173 KERSFIELD CIRCLE
City-St-Zip: LAKE MARY, FL 32746

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: BARBARA FULLER

DPST

10/05/2007

Electronic Signature of Signing Officer or Director

Date