

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# V58895

**Entity Name:** DISTRIBUTORS' SOURCE OF FLORIDA, INC.

**Current Principal Place of Business:**

1175 FLORIDA CENTRAL PKWY.  
3402  
LONGWOOD, FL 32750

**Current Mailing Address:**

1175 FLORIDA CENTRAL PKWY.  
3402  
LONGWOOD, FL 32750 US

**FEI Number: 59-3138689**

**Certificate of Status Desired: No**

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

MANISCALCO, DOUGLAS  
1315 S. INTERNATIONAL PKWY.  
1101  
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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title	P	Title	VP
Name	ECKARD, STEVE	Name	DOUGLAS, GRANT W.
Address	434 WOLDUNN CIRCLE	Address	8945 EL PASO DR
City-State-Zip:	LAKE MARY FL 32746	City-State-Zip:	LAKE WORTH FL 33467

*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: STEVE ECKARD**

**PRESIDENT**

**03/08/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date