

**2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F15000002411

**Entity Name:** STELLAR INDUSTRIAL SUPPLY, INC.**Current Principal Place of Business:**711 EAST 11TH STREET  
TACOMA, WA 98421**Current Mailing Address:**711 EAST 11TH STREET  
TACOMA, WA 98421**FEI Number:** 52-7256516**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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 DIRECTOR  
Name DIMMER, JOHN  
Address 1019 PACIFIC AVE  
916  
City-State-Zip: TACOMA WA 98402

Title SECRETARY, DIRECTOR  
Name DALY, TIMOTHY  
Address 711 EAST 11TH STREET  
City-State-Zip: TACOMA WA 98421

Title VP, DIRECTOR  
Name SLATER, STEVE  
Address 711 EAST 11TH STREET  
City-State-Zip: TACOMA WA 98421

Title DIRECTOR  
Name MEAD, BARBARA  
Address 711 EAST 11TH STREET  
City-State-Zip: TACOMA WA 98421

Title CEO, DIRECTOR  
Name WIBORG, JOHN  
Address 711 EAST 11TH STREET  
City-State-Zip: TACOMA WA 98421

Title DIRECTOR  
Name MORSE, ROBERT  
Address 3002 W ILLINOIS ST  
City-State-Zip: BELLINGHAM WA 98225

Title DIRECTOR  
Name CHAMBERLIN, JAMES  
Address 711 EAST 11TH STREET  
City-State-Zip: TACOMA WA 98421

*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:** TIMOTHY J DALY**SECRETARY****03/30/2020**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date