


**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 06, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # 586103**  
 1. Entity Name  
**UMATILLA HARDWARE, INC.**



Principal Place of Business  
**811 N. CENTRAL AVENUE**  
**UMATILLA, FL 32784 US**

Mailing Address  
**811 N. CENTRAL AVENUE**  
**UMATILLA, FL 32784 US**

**DO NOT WRITE IN THIS SPACE**



01252008 No Chg-P CR2E034 (11/05)

4. FEI Number  
**59-1846066** Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**CARTER, ROY C.**  
**723 SUNRISE DR**  
**EUSTIS, FL 32726**

**DO NOT WRITE IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

HP00011422254  
 02/17/06-80093-015 150.00

10. OFFICERS AND DIRECTORS

TITLE P	<b>CARTER, ROY C.</b> <b>SUNRISE DRIVE LAKE JONNA</b> <b>EUSTIS, FL</b>
TITLE VP	<b>CARTER, ROYCADE, JR.</b> <b>SUNRISE DRIVE LAKE JONNA</b> <b>EUSTIS, FL</b>
TITLE S	<b>CARTER, DELORIS P.</b> <b>SUNRISE DRIVE LAKE JONNA</b> <b>EUSTIS, FL</b>
TITLE T	<b>WILSON, DEEANN</b> <b>24517 SOUTHEAST HWY 450</b> <b>UMATILLA, FL</b>
TITLE VP	<b>WILSON, CHARLES</b> <b>24517 SOUTHEAST HWY 450</b> <b>UMATILLA, FL</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** *Charles Wilson* **Charles Wilson** **1/31/6** **352-669-34**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #