

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 153830

FILED
Jul 06, 2006
Secretary of State

Entity Name: GRANGER LUMBER - HARDWARE, INC.

Current Principal Place of Business:

1180 SOUTH LANE AVENUE
JACKSONVILLE, FL 32205

New Principal Place of Business:

Current Mailing Address:

1180 SOUTH LANE AVENUE
JACKSONVILLE, FL 32205

New Mailing Address:

FEI Number: 59-0582671 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

AKEL, DANIEL D
ONE INDEPENDENT SQUARE
ONE INDEPENDENT DRIVE
JACKSONVILLE, FL 32202 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

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: CD () Delete
Name: GRANGER, SAMUEL C MR.
Address: 1180 SO. LANE AVE
City-St-Zip: JACKSONVILLE, FL 32205

Title: TVD () Delete
Name: GRANGER, HUGH J MR.
Address: 1180 LANE AVE SO
City-St-Zip: JACKSONVILLE, FL 32205

Title: P () Delete
Name: ROGERS, RANDALL L MR.
Address: 1180 LANE AVE SO
City-St-Zip: JACKSONVILLE, FL 32205

Title: VP () Delete
Name: MITOLA, DAN MR.
Address: 1180 LANE AVENUE SOUTH
City-St-Zip: JACKSONVILLE, FL 32205

Title: VP () Delete
Name: MULLINS, CRAIG MR.
Address: 1180 LANE AVENUE SOUTH
City-St-Zip: JACKSONVILLE, FL 32205

Title: SVP () Delete
Name: BURROWS, DENNIS A MR.
Address: 1180 LANE AVENUE SOUTH
City-St-Zip: JACKSONVILLE, FL 32205

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:

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 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: SAMUEL C. GRANGER

Electronic Signature of Signing Officer or Director

CHMN

07/06/2006

Date