## 2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

## Mar 28, 2003 8:00 am **Secretary of State** 230956 DOCUMENT # 03-28-2003 90058 006 \*\*\*150.00 1. Entity Name SANDERHOFF HARDWARE, INC. Principal Place of Business Mailing Address 1732 STEADLEY AVE. 1732 STEADLEY AVE. PUNTA GORDA FL 33950-6099 **PUNTA GORDA FL 33950-6099** IIS US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State Applied For 4. FEI Number 59-0881431 Not Applicable Zip Country Zip Country \$8.75 Additional Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent ROGERS, DONALD N. Street Address (P.O. Box Number is Not Acceptable) 1732 STEADLEY-AVET PUNTA GORDA FL 33950 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 egistered agent SIGNATURE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Addition ROGERS, DONALD N. NAME NAME 5906 Duncan Rd 1732 STEADLEY AVE STREET ADDRESS STREET ADDRESS PUNTA GORDA FL CITY-ST-ZIP CITY-ST-7IP TITLE TITLE SAVASUK, MICHELLE A. NAME NAME 425 W. ANN STREET STREET ADDRESS STREET ADDRESS PUNTA GORDA FL CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP ☐ Addition TITI F ☐ Delete TITLE Change NAME NAME

12. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

**FILED**