2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 245262

Entity Name: PROCTOR HARDWARE, INC.

FILED Apr 22, 2009 Secretary of State

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Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
580 ATLAN NEPTUNE	ITIC BLVD BEACH, FL	32266			
Current Ma	ailing Addre	ss:	New Mailing Addre	New Mailing Address:	
580 ATLAN NEPTUNE	ITIC BLVD BEACH, FL	32266			
FEI Number:	59-0916340	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of	Current Registered Agent:	Name and Address	of New Registered Agent:	
	I, JACK F. RD STREET VILLE BEACH	H, FL 32250 US	PROCTOR, JACK F. 580 ATLANTIC BLVE NEPTUNE BEACH, I	D.	
The above in the State		submits this statement for the pu	rpose of changing its register	ed office or registered agent, or both,	
SIGNATURE:				04/22/2009	
	Electro	nic Signature of Registered Agen	t	Date	
Election Cam	npaign Financii	ng Trust Fund Contribution ().			
OFFICERS	AND DIREC	CTORS:	ADDITIONS/CHANG	GES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	CEO (PROCTOR, JA 4495 GOLDCI JACKSONVILI	REST LN	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	P (PROCTOR, S 2309 PINE ISI JACKSONVILI	LAND CT	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	COO (PROCTOR,BE 4495 GOLDCI JACKSONVILI	REST LN	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V (PROCTOR,JC 1344 PINEWO JACKSONVILI	OOD RD.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PROCTOR, E 1012 BUDDY		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PROCTOR, D. 580 ATLANTIC		Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify 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: ELIZABETH W. PROCTOR ST 04/22/2009