FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**

1**9**98



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

264770

(9)

CHATTAHOOCHEE ACE HARDWARE, INC.

Principal Place of Business			
211	WEST	WASHINGTON ST	

Mailing Address

FILED May 19 1998 8:00am Secretary of State



P.O. BOX 278 CHATTAHOOCHEE FL 32324 CHATTAHOOCHEE FL 32324 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u>12/11/1962</u> 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-1033091 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Country Zψ This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name REYNOLDS, WILTON B JR. 211 WEST WASHINGTON ST. 82 Street Address (P.O. Box Number is Not Acceptable) CHATTAHOOCHEE FL 32324 83 **B4** City Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Signature, typed or printed name of registered agent and title d applicable [NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELETE Change Addition PSD 1.1 1971.€ TITLE REYNOLDS, WILTON B JR. NAME 1.2 NAME 211 WEST WASHINGTON ST. STREET ADDRESS 1.3 STREET ADDRESS CHATTAHOOCHEE FL 32324 CITY-ST-ZIP 1.4 CITY - ST - ZIP Addition DELETE TITLE 21 TITLE Change NAME 22 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Спапре Addition TITLE 6.1 THILE 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 of trustice empower to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 6, 2011 an all filment with an address.

5-1-98

850-663-4673