

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 339463

FILED
Jan 20, 2009
Secretary of State

Entity Name: BRANDIES ACE HARDWARE, INC.

Current Principal Place of Business:

617299 BRANDIES AVE
P.O. BOX 97 (MAIL)
CALLAHAN, FL 32011 US

New Principal Place of Business:

617299 BRANDIES AVE
CALLAHAN, FL 32011 US

Current Mailing Address:

617299 BRANDIES AVE
P.O. BOX 97 (MAIL)
CALLAHAN, FL 32011 US

New Mailing Address:

FEI Number: 59-1226256 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FACHKO, PATRICIA B
45514 BOOTH ST
PO BOX 43
CALLAHAN, FL 32011 US

Name and Address of New Registered Agent:

FACHKO, PATRICIA B
45514 BOOTH ST
CALLAHAN, FL 32011 US

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: _____

01/20/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: HAGAN, ANN B,
Address: 35121 KAREN RD
City-St-Zip: CALLAHAN, FL 32011

Title: TD () Delete
Name: STOKES, KAY B
Address: 3998 CR 119
City-St-Zip: BRYCEVILLE, FL 32009

Title: PD () Delete
Name: FACHKO, PATRICIA B,
Address: 45514 BOOTH ST
City-St-Zip: CALLAHAN, FL 32011

Title: SD () Delete
Name: FACHKO, RAYMOND D JR,
Address: 45312 HIDEAWAY LN
City-St-Zip: CALLAHAN, FL 32011

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:

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: PATRICIA B FACHKO

PD

01/20/2009

Electronic Signature of Signing Officer or Director

Date