FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # 1. Corporation Name

368458

(6)

BRENTWOOD HARDWARE, INC.				
Principal Place of Business	Malling Address		1 000 1 FD 6716 B 0710 1 1074 1 1 1 1 1 1	ical obst. Asasi miasi miasi miasi measi minii obas
3302 PEARL ST JACKSONVILLE FL 32206-2043	3302 PEARL ST JACKSONVILLE FL 3	2206-2043		
			3. Date incorporated or Qualified 08/17/1970	3a. Date of Last Report 07/14/1995
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt. #, etc.	Suite, Apt. #, etc.		59-1309020	Not Applicable
22 City & State	27 City & State		5. Certificate of Status Desired	\$8.75 Additional Fee Required
23	28		Election Campaign Financing Trust Fund Contribution	S \$5.00 May Be Added to Fees
Zip Country 25	Ζ _Ι ρ 29	Country 30	8. This corporation has liability fo Florida Statutes	r intangible tax under s 199.032, is ☐ No
g. Name and Address of Currer	nt Registered Agent		10. Name and Address of New	Registered Agent
HILL, Marvine I, 3302 PEARL STREET			ss (P.O. Box Number is Not Accepta	able)
JACKSONVILLE FL 32206		⁸³ 3302 PI	EARL STREET	
		84 City JACKSON	WILLE	FL 85 Zip Code 32206
*11. Pursuant to the provisions of Sections 607.0502 or registered agent, or both, in the State of Flori familiar with, and accept the obligations of, Sect	? and 607,1508, Florida Statut da. Such change was authori, tion 607,0505, Florida Statute	les, the above-named corpora	tion submits this statement for the prior directors. I hereby accept the app	urpose of changing its registered office pointment as registered agent. I am
SIGNATURE MASSICIOS	1 (31,11)	Preadent	7	03-03-96
Signature, typed or printed name of registered agent	taiotitu lappicatile (No ID DIFECTORS	OTic: Flegistered Agent signature required		DATE
12. OFFICERS AN	DELETE	13.	ADDITIONS/CHANGES TO OF	FICERS AND DIRECTORS IN 12 Change
NAME PAFFORD MAMIE IRENE		1.2 NAME		Change [] Addition
STREET ADDRESS 15775 Sawpin	t Roli	1.3 STREET ADORESS		
CITY-ST-ZIP JAX FL 32226		1.4 C(TY - ST - ZIP		
TITLE PS	☐ DELETE	2 1 HTLE		Change Addition
NAME HILL MARVINE I	_	2.2 NAME		
STREET ADDRESS 15325 SAWDI	+ Rd.	2 3 STREET ADDRESS		
STREET ADDRESS 15725 SAWPT		2 4 CITY-ST-ZIP		
TITLE D	☐ DÉLETE	3 1 TITLE		Change Addition
NAME HILL, CARL M.	101	3.2 NAME		
STREET ADDRESS 15775 Sawf	17 Koli	3.3. STREET ADDRESS		
		3 4 CITY - ST - ZIP		
TITLE	☐ DELETE	4 1 TITLE		Change Addition
NAME		4 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-SI-ZIP TITLE	[7] DELETE	44 CHY-ST-ZIP		
NAME		5 1 TITLE 52 NAME		Change Addition
STREET ADDRESS		E I		
CITY-ST-ZP		5.3 STREET ADDRESS 5.4 CHY-ST-ZIP		
TITLE	[7] DELĒTE	6 1 TITLE		Change Addition
NAME		62 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY - ST - ZiP		6 4 CITY-ST-ZIP		
14. I do hereby certify that the information supplied certify that the information indicated on this annualtry that I am an officer or director of the conceppears in Block 12 or Block 13 if changed, or	ual report or supplemental and pration or the receiver or truste	nished and does not qualify for rual report is true and accurate se empowered to execute this	and that my gionature chall have the	a cama lagal offact on if made under

SIGNATURE:

MARVINE I. HILL

03-03-96 (904) 3530600