2008 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Apr 09, 2008 08:00 All Secretary of State **DOCUMENT # 386384** 1. Entity Name GROVELAND LUMBER & HARDWARE CO. Principal Place of Business Mailing Address 1912 18TH STREET W. 1912 18TH ST W **BRADENTON FL 34205 BRADENTON FL 34205** 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #. etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/07) City & State City & State 4. FEI Number Applied For 59-1364339 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name JORDAN, LENNON D. Street Address (P.O. Box Number is Not Acceptable) 1912 18TH ST W BRADENTON FL 34205 City Zip Code 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. Fam familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or precedularito of regretered inject and the Tappicable (NOTE: Registered Agent exposture required when reinstituting) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2008 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Derete TITLE ☐ Change ☐ Addition NAME JORDAN, LENNON D NAME U00000697529 04/21/08-80024-001 150.00 STREET ADDRESS 1912 18TH ST W STREET ADDRESS CITY-ST-ZIP **BRADENTON FL 34205** CITY-ST-ZIP TITLE Derete ппе □ Change ☐ Addition NAME JORDAN, GRACE S STREET ADDRESS 1912 18TH ST W STREET ADDRESS CITY-ST-7/P **BRADENTON FL 34205** CITY-ST-ZIP mu ☐ De⊧ete Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-CT-ZIP ITILE ☐ Daiete TITLE Change ☐ Addition MAIN NAML STREET ADDRESS STREET ADDRESS GITY-ST-ZIP CITY-SI-ZIP TITLE ☐ De-ele TITLE Change Addition NAME NAMI STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-S1-ZIP TITLE ☐ Delete TITLE ☐ Change □ Addition NAME STREET ADDRESS STREET ADDRESS CHY-ST ZIP CHTY-ST ZIP 12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119. 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 in the corporation of 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.

OR DIRECTOR

ENNON D. JURDAN

FILED