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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996 **DOCUMENT #** 

101

	an ace hardware of C	MANUEL FAIN, MO.		[ <b>: 28</b> ]   <b>6  38</b>   <b>1  68</b>   <b>6  1  6</b>	
Principal Place	of Business	Mailing Address			
529 KINGSLEY AVENUE ORANGE PARK FL 32073		529 KINGSLEY AVE. ORANGE PARK FL 32073			
		US		3. Date Incorporated or Qualified	3a. Date of Last Report
Principal Dir	ace of Business			11/17/1972	02/22/1995
i i	ice of Dosifiess	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt.	, etc.	Suite, Apt. #, etc.		59-1426212	Not Applicabl
2		27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
3		28	- np //	Trust Fund Contribution	Added to Fees
<i>Z</i> ∖p ]	Country 25	Zm	Country	8. This corporation has liability for	intangible tax under s. 199.032,
' <del>-</del>	9. Name and Address of Currer	29 Apent			s ¹□No
			81 Name	10. Name and Address of New	Registered Agent
WALKE	R & KOEGLER - QUADRANT II	SOLITHPOINTE		•	
4655 S	ALISBURY ROAD SUITE 390	OOOTH OILLE	82 Street	Address (P.O. Hox Number is Not Accepta	
	ONVILLE FL 32256		83 10 1		
			84 City	29 100, Dute	200
-,			1 1-10	alisasuila	85 Zip Code
<ol> <li>Pursuant to or registere</li> </ol>	the provisions of Sections 607,0502 diagont, or both, in the State of Floria	and 607,1508, Florida Statute	es, the above named c	orporation submits this statement for the pushboard of directors. I hereby accept the app	rpose of changing its registered office
famil ar with	n, and accept the obligations of. Secti	ion 607.0505, Florida Stalutes	an by the corporation s	s troaird of directors. I hereby accept the app	pointment as registered agent. I am
IGNATURE					
	Color of the Color				
<u></u>	Ignature typed or printed name of registered agreet		te Pagerored Agent signarine i		ĐATE
2.	Agnature: typed or printed name of registered open of FICERS AND P	D DIRECTORS	13.		ICERS AND DIRECTORS IN 12
2. LE	OFFICERS AND		13.		DATE ICERS AND DIRECTORS IN 12 Change Addition
Z.	OFFICERS AND P HAMRICK, STEWART L	D DIRECTORS	13. - 1 1 HILE 1.2 NAME		ICERS AND DIRECTORS IN 12
LE ME HEET AODRESS	OFFICERS AND P HAMRICK, STEWART L RT 4 BOX 99-1 N/A	D DIRECTORS	13. 1 1 HILE 1.2 NAME 1 3 STREET ADORESS		ICERS AND DIRECTORS IN 12
LE ME HEET ACORESS Y-SI-ZiP	OFFICERS AND P HAMRICK, STEWART L	D DIRECTORS	13. - 1 1 HILE 1.2 NAME		ICERS AND DIRECTORS IN 12 Change Addition
Z.  ILE  ME  REET AUDRESS  IY-SI-ZIP  LE  ME	OFFICERS AND P HAMRICK, STEWART L RT 4 BOX 99-1 N/A CALLAHAN FL S HAMRICK, PEGGY H	D DIRECTORS	13. 1 1 TITLE 1.2 NAME 1.3 STREET ADOMESS 1.4 CHY-ST-ZIP		ICERS AND DIRECTORS IN 12
Z.  ILE  ME  REET AUDRESS  IY-SI-ZIP  LE  ME	OFFICERS AND P HAMRICK, STEWART L RT 4 BOX 99-1 N/A CALLAHAN FL S	D DIRECTORS	13. 1 1 1111E 12 NAME 13 STREET ACCHESS 1.4 CHY-ST 2IP 2 1 THLE		ICERS AND DIRECTORS IN 12 Change Addition
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SIGNATURE:

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