FILED

Jan 21, 2003 8:00 am Secretary of State 01-21-2003 90061 044 ***150.00

1. Entity Name HAGAN ACE HARDWARE OF ORANGE PARK, INC. Principal Place of Business Mailing Address JUUUUIMIZ 529 KINGSLEY AVENUE 1022 BLANDING BLVD ORANGE PARK FL 32065 ORANGE PARK FL 32073 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES Applied For City & State City & State 4. FEI Number 59-1426212 Not Applicable Zip Country Zin Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name HAGAN, DONALD W Street Address (P.O. Box Number is Not Acceptable) 1022 BLANDING BLVD **ORANGE PARK FL 32065** Zip Code City 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Added to Fees Trust Fund Contribution. Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. TITLE ☐ Change TITLE ☐ Delete NAME HAMRICK, STEWART L NAME STREET ADDRESS STREET ADDRESS 3067 LEM TURNER RD CITY-ST-ZIP CITY-ST-ZIP CALLAHAN FL 32011 ☐ Change TITLE

2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR

413108

DOCUMENT #

☐ Addition ☐ Addition ☐ Delete TITLE HAMRICK, PEGGY H NAME NAME STREET ADDRESS 3067 LEM TURNER RD STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP CALLAHAN FL 32011 Change ☐ Addition ☐ Delete TITLE TITLE D NAME NAME HAGAN, DONALD G STREET ADDRESS STREET ADDRESS 2029 KAREN ROAD CITY-ST-ZIP CITY-ST-ZIP CALLAHAN FL 32011 Change ☐ Addition Delete TITLE TITLE D NAME NAME HAGAN, ANN B STREET ADDRESS STREET ADDRESS 2029 KAREN ROAD CITY-ST-ZIP CITY-ST-ZIP CALLAHAN FL 32011 ☐ Change ☐ Addition Delete TITLE TITLE NAME HAGAN, DONALD W. NAME STREET ADDRESS STREET ADDRESS 6214 RIVER RD CITY-ST-ZIP CITY-ST-ZIP CALLAHAN FL 32011 ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME

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

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP