

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.  
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 440507 (2)

1. Corporation Name

PARKER-FRENCH ACE HARDWARE, INC.



Principal Place of Business

Mailing Address

14308 PALM BEACH BLVD., SE  
ALVA FL 33920

14308 PALM BEACH BLVD., SE  
FT MYERS FL 33905  
US

3. Date Incorporated or Qualified  
12/14/1973

3a. Date of Last Report  
04/28/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt #, etc.

22 City & State

23 Zip Country

24 25 29 30

4. FEI Number

59-1494621

Applied For  
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PARKER, JOSEPH R.  
2981 STYLES RD  
ALVA FL 33920

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and firm, if applicable

(NOTE: Registered Agent signature required when reappointing)

Both

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE V  
NAME FRENCH, EDNA M  
STREET ADDRESS 15464-10 ADMIRALTY CIRCLE  
CITY-ST-ZIP NORTH FORT MYERS FL

TITLE P  
NAME PARKER, JOSEPH R  
STREET ADDRESS 2981 STYLES RD  
CITY-ST-ZIP ALVA FL

TITLE V  
NAME FRENCH, ROBERT L  
STREET ADDRESS 15464-10 ADMIRALTY CIRCLE  
CITY-ST-ZIP NORTH FORT MYERS FL

TITLE T  
NAME PARKER, SANDRA J  
STREET ADDRESS 2981 STYLES RD  
CITY-ST-ZIP ALVA FL

TITLE V  
NAME FRENCH, ROBERT L, JR.  
STREET ADDRESS 13256 2ND ST. S.E.  
CITY-ST-ZIP FT. MYERS FL

TITLE S  
NAME FRENCH, CHERYL L.  
STREET ADDRESS 13256 2ND ST. S.E.  
CITY-ST-ZIP FT. MYERS FL

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE:

Cheryl L. French

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-12-96

941-694-3958

CR2E034 (3/96)