

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 440507

1. Corporation Name

PARKER-FRENCH ACE HARDWARE, INC.

Principal Place of Business

14308 PALM BEACH BLVD. SE  
ALVA FL 33920

Mailing Address

14308 PALM BEACH BLVD. SE  
FT MYERS FL 33905  
US

FILED  
Apr 23, 1999 8:00 am  
Secretary of State

04-23-1999 90201 017 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/14/1973

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 owes the current year Intangible  
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip Country

29 Zip Country

9. Name and Address of Current Registered Agent

PARKER, JOSEPH R.  
2981 STYLES RD  
ALVA FL 33920

10. Name and Address of New Registered Agent

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 *Joseph R. Parker*  
Signature, typed or printed name of registered agent and title if applicable.

JOSEPH R. PARKER, PRESIDENT

4/12/99  
DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

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

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

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

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

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

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

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

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

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

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

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

14. 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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment, with an address, with all other like empowered.

SIGNATURE:

*Joseph R. Parker*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOSEPH R. PARKER, PRESIDENT

4/12/99

(941) 694-3958  
Date Daytime Phone #

CR2E034 (1/98)