2000 UNIFORM BUSINESS REPORT (UBR)  $\mathtt{FILED}$ **DOCUMENT # 440507** Jul 25, 2000 8:00 am 1. Entity Name **Secretary of State** PARKER-FRENCH ACE HARDWARE, INC. 07-25-2000 90115 001 \*\*\*550.00 07-25-2000 90115 002 \*\*\*\*\*8.75 Principal Place of Business Mailing Address 14308 PALM BEACH BLVD., SE 14309 PALM BEACH BLVD.. SE ALVA FL 33920 FT MYERS FL 33905 DUUU 2. Principal Place of Business 3. Mailing Address 14308 PALM BEACH BLVD. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 59-1494621 Not Applicable FORT MYERS, Country \$8.75 Additional Zip 5. Certificate of Status Desired Fee Required 33905 LEE 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent ROBERT L. FRENCH, JR. PARKER, JOSEPH R. Street Address (P.O. Box Number is Not Acceptable) 2981 STYLES RD 15464-10 ADMIRALTY CIRCLE **ALVA FL 33920** Zio Code 33917 NORTH FORT MYERS tement for the purpose of changing its registered office or registered agent, or both, in the State of Florida ROBERT' L. FRENCH, JR. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible ... FILE NOW!!! FEE IS \$550.00\_\_\_\_\_ 10. Election Campaign Financing After SEPTEMBER 13, 2000 Min. will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. X Delete TITLE Change ☐ Addition TIT! F FRENCH, EDNA M NAME NAME 15464-10 ADMIRALTY CIRCLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP NORTH FORT MYERS FL CITY-ST-ZIP ☐ Addition Delete TITLE ☐ Change TITLE PARKER, JOSEPH R NAME NAME 2981 STYLES RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ALVA FL ☐ Change ☐ Addition Delete TITLE TITLE PARKER, SANDRA J NAME NAME 2981 STYLES RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ALVA FL CITY-ST-ZIP **□**X Change Addition TITLE ☐ Delete TITLE. FRENCH, ROBERT L., JR. NAME NAME FRENCH, ROBERT L., JR. 13256 2ND ST. S.E. STREET ADDRESS STREET ADDRESS 15464-10 ADMIRALTY CIRCLE CITY-ST-ZIP FT. MYERS FL CITY-ST-ZIP NORTH FORT MYERS, FL. TITLE ☐ Addition Delete TITLE V/S FRENCH, CHERYL L. NAME NAME FRENCH, CHERYL L. 13256 2ND ST. S.E. STREET ADDRESS STREET ADDRESS 15464-10 ADMIRALTY CIRCLE CITY-ST-ZIP CITY-ST-ZIP FT. MYERS FL NORTH FORT MYERS, FL. 33917 Change ☐ Addition TITLE TITLE · 🔲 Delete NAME NAME STREET ADDRESS STREET ADDRESS

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-7IP

SIGNATURE: SIGNATURE SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECT

CITY-ST-7IP

1/21/00

941/694-3958

Daytime Phone #