

2005 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 606475

1. Entity Name
Hutor Hardware Inc
720 New Warrington Rd
Pensacola, FL 32506



Principal Place of Business Mailing Address
720 New Warrington Rd
Pensacola, FL 32506

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country *Escambia* Zip Country

FILED
05 MAY 31 PM 2:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
04-05
CHECK HERE IF MAKING CHANGES

4. FEI Number *59-1879730* Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
Jack C Waters
800 New Warrington Rd
Pensacola, FL 32506

7. Name and Address of New Registered Agent
Name *Mary L. Waters*
Street Address (P.O. Box Number is Not Acceptable) *800 New Warrington Rd*
City *Pensacola* FL Zip Code *32506*

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 *Mary L. Waters* (NOTE: Registered Agent signature required when reappointing) DATE

9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	<i>Jack C. Waters</i>	☒ Delete	TITLE		☐ Change ☐ Addition
NAME	<i>800 New Warrington Rd</i>		NAME		
STREET ADDRESS	<i>Pensacola, FL 32506</i>		STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	<i>Mary L. Waters Pres.</i>	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	<i>800 New Warrington Rd</i>		NAME		
STREET ADDRESS	<i>Pensacola, FL 32506</i>		STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE	<i>Janet Waters Secretary</i>	☐ Change ☒ Addition
NAME			NAME	<i>800 New Warrington Rd</i>	
STREET ADDRESS			STREET ADDRESS	<i>Pensacola, FL 32506</i>	
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

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 changed, or on an attachment with an address, with all other like empowered

SIGNATURE *Janet C. Waters Treas Sec* Date *5-25-05*