1. Entity Nam	MENT # 60647 HARDWARE, INC.	5 2	,		FILED 03 JUL 28 AM II: 05	
•	e of Business RRINGTON ROAD FL 32506	Mailing Address 720 NEW WARRINGTON RD PENSECOLA FL 32506 US			SECRETARY OF STATE FALLAHASSEE. FLORIDA	
2. Principal P	3. Mailing Address	-				
Suite, Apt. #, etc.		Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES	
City & Stat	e /	City & State			4. FEI Number 59-1879730 Applied For Not Applicable	
Zip .	Country Zip Cour		try	5. Certificate of Status Desired See Required Fee Required	ı	
	6. Name and Address of Current	Registered Agent		Name	7. Name and Address of New Registered Agent	ı
WATERS, JACK C					ess (P.O. Box Number is Not Acceptable)	_
800 NEW WARRINGTON ROAD				Street Addre	ess (P.O. Box Number is Not Acceptable)	
PENSACOLA FL 32506						
				City	FL Zip Code	
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 June 10 Togistered agent and title if applicable. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE						
FILE NOW!!! FEE IS \$150.00						
After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State				•	9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees	
10.	OFFICERS AND	· · · · · · · · · · · · · · · · · · ·	11.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	•
TITLE NAME	PD Waters, Jack C	☐ Delete	TITLI		Change	9
STREET ADDRESS	800 NEW WARRINGTON RD			ET ADDRESS		
CITY-ST-ZIP	PENSACOLA FL			-ST-ZIP		ا زم
TITLE NAME	D Waters, Mary Louise	☐ Delete	TITLI NAM	3		۲
STREET ADDRESS	800 NEW WARRINGTON RD		STRE	ET ADDRESS		
CITY-ST-ZIP	PENSACOLA FL			-ST-ZiP	Carcata a Treasure	
NAME .		☐ Delete	TITLI NAM		Janet C. Waters Tanet C. Waters Ton RJ Pensacle F	
STREET ADDRESS				ET ADDRESS	Marcington RJ Pensacle F	
CITY-ST-ZIP			+			•
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TITLE . NAME		☐ Delete	TITLE		Addition	
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CITY-ST-ZIP	* 1		CITY	-ST-ZIP	1144	
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition ☐	
NAME STREET ADDRESS			NAM STRE	ET ADDRESS	ļ	, .
CITY-ST-ZIP			CITY	-ST-ZIP		
indicated	on this report or supplemental report is	true and accurate and that m	y signat	ure shall have t	n Section 119.07(3)(i), Florida Statutes. I further certify that the information the same legal effect as if made under oath; that I am an officer or director 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if	