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Jan 21 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # **G08315** (5)
1. Corporation Name
ACE HARDWARE OF DESTIN, INC.



Principal Place of Business
**235 MAIN ST.
DESTIN FL 32541
US**

Mailing Address
**P.O. BOX 1898
DESTIN FL 32540-1898
US**

3. Date Incorporated or Qualified
11/15/1982

3a. Date of Last Report
02/27/1996

4. FEI Number
59-2236448

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**

6. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business
21 Suite Apt # etc
22 City & State
23 Zip Country
24

2a. Mailing Address
26 Suite Apt #, etc
27 City & State
28 Zip Country
29

30

9. Name and Address of Current Registered Agent

**RICHARDSON, DANIEL L.
215 INDIGO LOOP
DESTIN FL 32541**

10. Name and Address of New Registered Agent

81 Name
Mitzi S. Hendryx

82 Street Address (P.O. Box Number is Not Acceptable)
4080 Burning Tree Dr

83

84 City
Destin

85 Zip Code
FL 32541

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 *Mitzi S. Hendryx* 1-14-97
(NOTE: Registered Agent signature required when reappointing) DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
PD	RICHARDSON, DANIEL L.	215 INDIGO LOOP	DESTIN FL	<input checked="" type="checkbox"/>
STD	RICHARDSON, BARBARA J.	215 INDIGO LOOP	DESTIN FL	<input checked="" type="checkbox"/>
D	RICHARDSON, MICHAEL R	218 DOLPHIN ESTATES COURT	DESTIN FL	<input type="checkbox"/>
D	RICHARDSON, MITZI S	4080 BURNING TREE DR	DESTIN FL	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	12 NAME	13 STREET ADDRESS	14 CITY - ST - ZIP	Change	Addition
21 TITLE	22 NAME	23 STREET ADDRESS	24 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>
31 TITLE	32 NAME	33 STREET ADDRESS	34 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>
41 TITLE	42 NAME	43 STREET ADDRESS	44 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>
51 TITLE	52 NAME	53 STREET ADDRESS	54 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>
61 TITLE	62 NAME	63 STREET ADDRESS	64 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>

14. I do 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.

SIGNATURE: *Mitzi S. Hendryx*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-14-97 904-837-6915
Date Daytime Phone #

CR2E034 (9/96)