

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 JAN 19 AM 11:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # G25970

(6)

1. Corporation Name

HARDWARE IMAGINATION, INC.

Principal Place of Business

C/O BUTLER, RUSSELL JR.
1575 CATTLEMEN RD.
SARASOTA FL 34232

Mailing Address

C/O BUTLER, RUSSELL JR.
1575 CATTLEMEN RD.
SARASOTA FL 34232

800001390148
-01/26/95--01051--005
DO NOT WRITE IN THIS SPACE \$200.00

3. Date Incorporated or Qualified

03/01/1983

3a. Date of Last Report

01/25/1994

4. FEI Number

50-8210359-59-2267227

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 has liability for intangible tax under S. 199.032,
Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

**BUTLER, RUSSELL JR
1563 ARCADIA AVE.
SARASOTA FL 34232**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **ST**
NAME **BUTLER, RUSSELL JR.**
STREET ADDRESS **1563 ARCADIA AVENUE**
CITY- ST- ZIP **SARASOTA FL**

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

☐ Change ☐ Addition

TITLE **PD**
NAME **ROYE, JIM**
STREET ADDRESS **4461 S.W. 34TH AVENUE**
CITY- ST- ZIP **FT. LAUDERDALE FL**

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

☐ Change ☐ Addition

TITLE **PD**
NAME **ROYE, JIM**
STREET ADDRESS **4461 SW 34TH AVENUE**
CITY- ST- ZIP **FT. LAUDERDALE FL**

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

☐ Change ☐ Addition

TITLE **VP**
NAME **PEDRERO, JUDY**
STREET ADDRESS **3110 ELMER ST.**
CITY- ST- ZIP **SARASOTA FL**

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

☐ Change ☐ Addition

TITLE **VP**
NAME **MICHAEL RADDICK**
STREET ADDRESS **9874 KILGORE ROAD**
CITY- ST- ZIP **ORLANDO FL**

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

☐ Change ☐ Addition

TITLE **VPD**
NAME **JOHN DAVIS**
STREET ADDRESS **6104 RIVERBOAT DRIVE**
CITY- ST- ZIP **STUART FL**

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

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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, changed, or on an attachment with an address.

SIGNATURE:

Russell Butler Jr

RUSSELL BUTLER JR

1/12/95

813-371-5238

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #