## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

(9)

HAGAN ACE HARDWARD OF MANDARIN, INC.

Principal Place of Business Mailing Address 12548 SAN JOSE BLVD. 1022 BLANDING BLVD. JACKSONVILLE FL 32223 **ORANGE PARK FL 32065** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/14/1984 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 59-2766531 Not Applicable 21 26 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. П 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Zip Country Ζιρ Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. 24 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name HAGAN, DONALD W 1022 BLANDING BLVD Street Address (P.O. Box Number is Not Acceptable) BUILDING 100 SUITE 200 83 **ORANGE PARK FL 32085** 84 32065

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, lyped or p (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. \_\_\_ Addition DELETE Change 1.1 TITLE TITLE PD HAGAN, DONALD G. 1.2 NAME NAME 594 GLASGOW CT. STREET ADDRESS 1.3 STREET ADDRESS ORANGE PARK FL CITY-ST-ZIP 1.4 CITY-ST-ZIP Change Addition DELETE 2.1 TITLE TITLE SD HAGAN, ANN B. 2.2 NAME NAME 594 GLASGOW CT. STREET ADDRESS 2.3 STREET ADDRESS ORANGE PARK FL CiTY-ST-ZIP 2.4 CITY-ST-ZIP Change Addition DELETE 31 TITLE TITLE HAGAN, DONALD W. Waiy River RD NAME HAGMAN, DONALD W 32 NAME 1022 BLANDING BLVD. STREET ADDRESS 3.3 STREET ADDRESS CALLAHAN, FL 32011 ORANGE PARK FL CITY-ST-ZIP 3.4. CITY - ST - ZIP Change Addition DELETE 4.1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP Change Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5 3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP Change Addition DELETE 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

CITY-ST-ZIP 14. 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 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 machine 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 machine 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 indicate 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.

6.4 CITY-ST-ZIP

21/0/198

**FILED** 

Feb 23 1998 8:00am

Secretary of State