

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 26, 2001 8:00 am
Secretary of State
 04-26-2001 90089 007 ***150.00

DOCUMENT # P00000105137

1. Entity Name

ACE HARDWARE OF NAVARRE, INC.

Principal Place of Business

Mailing Address

~~P.O. BOX 781~~
~~MARY ESTHER FL 32569~~

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~~MARY ESTHER FL 32569~~

- Address Change -

2. Principal Place of Business

8188 NAVARRE PKWY

Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 1898

Suite, Apt. #, etc.

City & State

NAVARRE, FL

City & State

Destin, FL

Zip

32566

Country

U.S.A.

Zip

32540

Country

U.S.A.

4. FEI Number

59-3683466

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WHITEHEAD, R. SCOTT ESQ
 WEIMORTS & WHITEHEAD, P.A.
 4507 FURLING LN, STE 209
 DESTIN FL 32541

7. Name and Address of New Registered Agent

Name Mitzi S. Hendryx
 Street Address (P.O. Box Number is Not Acceptable)
 500 Beach Drive
 City Destin FL Zip Code 32541

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.

SIGNATURE

Mitzi S. Hendryx Mitzi S. Hendryx

4-19-01

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

(NOTE: Registered Agent signature required when re-instating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
 After MAY 1, 2001 Fee will be \$550.00
 Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	P Mitzi S. Hendryx
STREET ADDRESS	500 Beach Drive
CITY-ST-ZIP	Destin, FL 32541
TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	VP Alvin J. Hendryx
STREET ADDRESS	500 Beach Drive
CITY-ST-ZIP	Destin, FL 32541
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Mitzi S. Hendryx
 Mitzi S. Hendryx

4-19-01

Date

850-837-6915

Daytime Phone #

CR2E034 (10/00)