

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

FILED

Apr 03 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 # P93000061668 (8)

1. Corporation Name

MARTIN BUILDER SUPPLY & HARDWARE, INC.

Principal Place of Business

2305 US HWY 86 W
SANTA ROSA BEACH FL 32459
US

Mailing Address

2305 US HWY 86 W
SANTA ROSA BEACH FL 32459-5339
US



2. Principal Place of Business

21 B20 N. County Hwy 393
Suite, Apt. #, etc.

22

City & State

23 SANTA ROSA BCH

Zip

24 32459

Country

25 WALTON

2a. Mailing Address

26 B20 N. County Hwy. 393
Suite, Apt. #, etc.

27

City & State

28 SANTA ROSA BCH.

Zip

29 32459

Country

30 WALTON

9. Name and Address of Current Registered Agent

WENSEL, KATHY M
2305 US HWY 86 W
SANTA ROSA BCH. FL 32459

3. Date Incorporated or Qualified

08/30/1993

3a. Date of Last Report

04/29/1996

4. FEI Number

59-3174526

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

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

B20 N. County Hwy. 393

84 City

SANTA ROSA BEACH

FL

85 Zip Code

32459

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

Kathy M Wensel, Secretary/Treasurer

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

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

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME MARTIN, FRANK A
STREET ADDRESS P.O. BOX 805 N/A
CITY-ST-ZIP FORT PAYNE AL 35967

TITLE VP ☒ DELETE

NAME RICE, JAMES F
STREET ADDRESS 242 WOODLAWN CIRCLE
CITY-ST-ZIP DEFUNIAK SPRINGS FL

TITLE ST ☐ DELETE

NAME WENSEL, KATHY M
STREET ADDRESS P O BOX 1450 N/A
CITY-ST-ZIP SANTA ROSA BEACH FL 32459

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

VP
SCOTT H. WENSEL
PO BOX 1450 N/A
SANTA ROSA BEACH, FL 32459

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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:

Kathy M Wensel KATHY M. WENSEL 3/18/97 267-4690

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)