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May 01 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 # P96000045189 (3)

1. Corporation Name

FAMILY HARDWARE OF CAPE CORAL, INC.



Principal Place of Business

13871 NO CLEVELAND AVENUE
FORT MYERS FL 33903

Mailing Address

13871 NO CLEVELAND AVENUE
FORT MYERS FL 33903-4318

2. Principal Place of Business

21 622 S.E. 47TH TERRACE

Suite, Apt. #, etc.

22 CAPE CORAL, FL

City & State

23 33904

Zip

Country

24

2a. Mailing Address

26 622 S.E. 47TH TERRACE

Suite, Apt. #, etc.

27 CAPE CORAL, FL

City & State

28 33904

Zip

Country

29

3. Date Incorporated or Qualified

05/21/1996

3a. Date of Last Report

4. FEI Number

65-0673237

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

TISDALE, EDWARD W
13871 NO CLEVELAND AVENUE
FORT MYERS FL 33903

10. Name and Address of New Registered Agent

81 Name

TISDALE, EDWARD W.

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

622 S.E. 47TH TERRACE

83 CAPE CORAL, FL 33904

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

12. OFFICERS AND DIRECTORS

TITLE	D	DELETE
NAME	TISDALE, EDWARD W	
STREET ADDRESS	3420 SW FIRST PLACE	
CITY - ST - ZIP	CAPE CORAL FL 33914	
TITLE	D	DELETE
NAME	TISDALE, NANCY E	
STREET ADDRESS	3420 SW FIRST PLACE	
CITY - ST - ZIP	CAPE CORAL FL 33914	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
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		
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:

[Signature]

ED TISDALE

4/26/97

941-542-6765

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0396875

CR2E034 (9/96)